

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000076018 (7)

1. Corporation Name

GENERAL FOOD RESOURCES, INC.



Principal Place of Business

7061 OLD KINGS RD S #59
JACKSONVILLE FL 32217

Mailing Address

7061 OLD KINGS RD S #59
JACKSONVILLE FL 32217

2. Principal Place of Business

21 11112 San Jose Blvd

Suite, Apt. #, etc.

22 23

City & State

23 Jax FL

Zip

24 32223

Country

25 Dnm

2a. Mailing Address

25 11112 San Jose Blvd

Suite, Apt. #, etc.

27 23

City & State

28 Jax FL

Zip

29 32223

Country

30 Dnm

3. Date Incorporated or Qualified

09/29/1995

3a. Date of Last Report

4. FEI Number

59-3344975

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CHANG, ALEX
7061 OLD KINGS RD S #59
JACKSONVILLE FL 32217

10. Name and Address of New Registered Agent

81 Name CHANG ALEX
82 Street Address (P.O. Box Number is Not Acceptable)
11112 San Jose Blvd
83 #23
84 City Jax FL 85 Zip Code 32223

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
D	CHANG, ALEX	7061 OLD KINGS RD S #59	JACKSONVILLE FL 32217	<input type="checkbox"/>
D	CHANG, FRANK	7700 GLEASON RD #7D	KNOXVILLE TN 37919	<input type="checkbox"/>
D	CHANG, CHARLES	11 ARBOR CLUB DR #103	PONTE VEDRA BEACH FL 32082	<input type="checkbox"/>
D	YACHI, WE AO	893 JETTY CT	PONTE VEDRA BEACH FL 32082	<input type="checkbox"/>
<input type="checkbox"/>				<input type="checkbox"/>
<input type="checkbox"/>				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
P	CHANG ALEX	7061 Old Kings Rd S #59	Jax FL 32217	<input checked="" type="checkbox"/>
V	CHANG Frank	11112 San Jose Blvd	Jax FL 32223	<input checked="" type="checkbox"/>
T	CHANG Charles	11112 San Jose Blvd	Jax FL 32223	<input type="checkbox"/>
S	YUCHI wen Hao	893 JETTY CT	Ponte Vedra FL 32082	<input checked="" type="checkbox"/>
<input type="checkbox"/>				<input type="checkbox"/>
<input type="checkbox"/>				<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)