SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE *CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996819 CORPORATIONS DOCUMENT # P95000083284 (6) PEPPENELLI'S MEAT AND DELI, INC. Principal Place of Business Maiting Address 16440 SOUTH TAMIAMI TRAIL 16440 SOUTH TAMIAMI TRAIL FORT MYERS FL 30000-FORT MYERS FL 33309 3390*8* 3. Date Incorporated or Qualified 3a. Date of Last Report 10/31/1995 2. Principal Place of Business Mailing Address Applied For Not Applicable Suite Apt #, etc Suite, Apt # etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζıp Country Country This corporation has liability for intangible tax under s 199.032 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent CORPORATION SERVICE COMPANY 82 1201 HAYS STREET TALLAHASSEE FL 32301-2525 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 agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607.0505. Florida Statutes.

SIGNATURE

State of Florida State of Flor 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THILE DELETE 1.11018 Change Addition NAME PEPPENELLI, ANTHONY R 1.2 NAME **CR2E034** STREET ADDRESS 16440 SOUTH TAMIAMI TRAIL 1.3 STREET ADDRESS CITY-ST-ZIP FORT MYERS FL 33909 14 CITY ST-71P DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CHTY-ST-ZIP 2 4 CITY - ST- ZIF TITLE DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CHY ST-ZIP TITLE DELETE 4.1 TIFLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 44 CHY ST-ZIP TITLE DELETE 5.1 THLE Change Addition NAME 52 NAME STREET ADDRESS 5.3 STREET ADORESS CITY-ST-ZIP 5.4 CHTY - ST - ZIP TITLE DELETE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 14. I do hereby cert by 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 final rily 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 617, Florida Statutes; and

8/2/96 941-454-7122

Anthony R. Proposelli Anthony R. PEPPENElli