FIL	E NOW: FILING FEE A	AFTER MAY 1ST IS	\$ \$550.00		
CO	PROFIT RPORATION UAL REPORT	FLORIDA DEFERT Sandra B.	Mortham	Fil	KUVI: L KD -ED
	1998	Secretary DIVISION OF CO		98 DEC 15	AM to
DOCU 1. Corporation	MENT # P9500	0088155 (3)		SEÇRETARY TALLAHASSEE	OF STATE
FLOR	IDA FRESH, INC.				
Principal Plac	ee of Business	Mailing Address			
19905 SW 334TH STREET HOMESTEAD FL 33030 HOMESTEAD FL 33030  TO STREET HOMESTEAD FL 33030			г	REINS ECONO E-WRITE IN THE	NT. 98
2 Principal (	Place of Business	2a. Mailing Address		11/16/1995 4. FEI Number	I Annua For
21 300 Suite, Apt	N. Krome Ave		701348	65-0619997	Applied For Not Applicable
22 3016, Apr.  City & Stat	ding#1	27 City & State	<u></u>	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Flori	da City It	28 Homestead	FC	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 3 303		<u> </u>	Country SA	This corporation owes or has paid the Personal Property Tax due June 30.	☐ Yes ☐ No
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  CORPORATION SERVICE COMPANY  81 Name STEVEN SAPP					
1201 HAYS STREET  82 Street Address (P.O. Box Number is Not Acceptable)  TALLAHASSEE FL 32301-2525					
•			83	n. (2)	
			84 City Ho	mestead F	
office or a agent, I a	to the provisions of Sections 607.0502 registered agent, or both, in the State of familiar with and accept the obligations for the colligation of the collinear of th	e and 607,1508, Florida Statutes Of Florida Such change was aut Kons of, Section 607,0505, Flori	, the above-named cor thorized by the corpora da Statutes.	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	ppointment as registered
SIGNATURE	Signature, typed or printed name of registered ager	r and title if applicative. (NOTE, F	Registered Agent signature requ	ured when reinstating) DATE	/98
12.	OFFICERS AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition
NAME	SAPP, STEVEN S	T perete	1.1 TITLE 1 2 NAME	100002721	0219
STREET ADDRESS CITY-ST-ZIP	19905 SW 334TH STREET HOMESTEAD FL 33030		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	-12/23/36i *****750.00	01066—018 *****750_00
TITLE NAME	VSTD SAPP, EDWIN B	☐ DELETE	2.1 TITLE 2.2 NAME		Change Addition O
STREET ADDRESS CITY-ST-ZIP	19905 SW 334TH STREET HOMESTEAD FL 33030		2.3 STREET ADDRESS 2.4 CITY - ST-ZIP	••	
TITLE NAME	D SAPP, FRANK	☐ DELETE	3.1 TITLE 3.2 NAME	, , , , , , , , , , , , , , , , , , ,	☐ Change ☐ Addition
STREET ADDRESS	19905 SW 334TH STREET		3 3 STREET ADDRESS		ļ
CITY-ST-ZIP TITLE	HOMESTEAD FL 33030	<b>₩</b> DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME	SAPP, BLANCHE	<b>/                                    </b>	4. 2 NAME		
STREET ADDRESS	19905 SW 334TH STREET		4.3 STREET ADDRESS		
CITY-ST-ZIP	HOMESTEAD FL 33030	☐ DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME	1 A collect	
STREET ADDRESS			5.3 STREET ADDRESS	PG 15/12	
CITY-ST-ZIP		Dr. err	5.4 CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , ,	Change I Addition
TITLE NAME		☐ DELETE	6.1 TITLE 6.2 NAME		Change 1 Addition
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
indicated	on this annual report or supplemental	annual report is true and accura	ate and that my signatu	Section 119.07(3)(i), Florida Statutes. I further ire shall have the same legal effect as if made to uired by Chapter 607, Florida Statutes; and tha	under oath; that I am an

SIGNATURE:

Block 12 or Block 13 if changed or on an attachment with an address.

GNATURE: Security Responses to the second of the second of

4/30/98

305-245-4691