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PROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

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Secretary of State

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000090150 (0)

1ST CHOICE FOOD SERVICES, INC. Principal Place of Business Mailing Address 733 S.W. MARTIN LUTHER KING BLVD. 733 S.W. MARTIN LUTHER KING BLVD. DO NOT WRITE IN THIS SPACE **BELLE GLADE FL 33430** BELLE GLADE FL 33430 3. Date Incorporated or Qualified 11/27/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0636398 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 Trust Fund Contribution Added to Fees Zip Country Zip 8. This corporation owes or has paid the current year Intangible 24 Yes 25 29 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HOUSTON, JAMES T. III 733 S.W. AVE. E 82 Street Address (P.O. Box Number is Not Acceptable) STE. A 83 **BELLE GLADE FL 33430** Zip Code 84 City 85 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 nurse of registered agent and life if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 TITLE TITLE HOUSTON, JAMES T 1.2 NAME NAME 733 S.W. MARTIN LUTHER KING BLVD. STE A STREET ADDRESS 1.3 STREET ADDRESS BELLE GLADE FL 33430 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME HOUSTON, JAMES T JR 2.2 NAME 733 S.W. MARTIN LUTHER KING BLVD. STE A STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP BELLE GLADE FL 33430 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Addition TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition DELETE 5.1 TITLE ☐ Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADORESS** CITY-ST-ZIP

14. Thereby certify that the information expliced with this filing ard is not qualify for the exemption stated in Section 119.07(3)(i), 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 my the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if charged, on the an application of the corporation of the corporation