

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000001796 (7)**
1. Corporation Name
**CELEBRITY FOOD DISTRIBUTION SYSTEMS, INCORPORATE
D**



Principal Place of Business 614 BANYAN TR BOCA RATON FL 33431 US	Mailing Address 614 BANYAN TR BOCA RATON FL 33431 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 01/02/1996	
				4. FEI Number 38-6192773	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent KANTER, ALAN 614 BANYAN TR BOCA RATON FL 33431		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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		(NOTE: Registered Agent signature required when reinstating)		DATE							
12. OFFICERS AND DIRECTORS						13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	P	<input type="checkbox"/> DELETE	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition							
NAME	KANTER, ALAN		1.1 NAME								
STREET ADDRESS	614 BANYAN TR		1.2 NAME								
CITY-ST-ZIP	BOCA RATON FL		1.3 STREET ADDRESS								
			1.4 CITY-ST-ZIP								
TITLE	S	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition							
NAME	KANTER, SAMUEO		2.2 NAME								
STREET ADDRESS	3400 S OCEAN DR #50		2.3 STREET ADDRESS								
CITY-ST-ZIP	HIGHLAN BCH FL		2.4 CITY-ST-ZIP								
			3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition							
TITLE		<input type="checkbox"/> DELETE	3.2 NAME								
NAME			3.3 STREET ADDRESS								
STREET ADDRESS			3.4 CITY-ST-ZIP								
CITY-ST-ZIP			4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition							
			4.2 NAME								
TITLE		<input type="checkbox"/> DELETE	4.3 STREET ADDRESS								
NAME			4.4 CITY-ST-ZIP								
STREET ADDRESS			5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition							
CITY-ST-ZIP			5.2 NAME								
			5.3 STREET ADDRESS								
TITLE		<input type="checkbox"/> DELETE	5.4 CITY-ST-ZIP								
NAME			6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition							
STREET ADDRESS			6.2 NAME								
CITY-ST-ZIP			6.3 STREET ADDRESS								
			6.4 CITY-ST-ZIP								

14. I hereby certify that the information supplied with this filing does 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 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:  **4/6/98** **561-988-1231**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0326100

CRZE034 (10/97)