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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9600005626 (2)

DEFUNIAK SPRINGS FOODS, INC.

Principal Place of Business

Mailing Address

750 WEST LUMSDEN ROAD BRANDON FL 33511

SIGNATURE:

P.O. BOX 1143 BRANDON FL 33509-1143

## **FILED** Mar 12 1997 8:00am Secretary of State

813 684.0622

3-1-97



0,0000,12			,		3. Date incorporated or Qualified 3a. Date of Last Report
					01/17/1996
	lace of Business	28. Mailing Address	× 100	E	4. FEI Number Applied For Not Applied For
Suite: Apt.	ico morgane	26 0/503 HU	yun	<u>, c</u>	
2	-	27			5. Certificate of Status Desired S8.75 Additional Fee Required
3 $Val$	rico FL	City & State	FI	~	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zig 335	Gountry Country	Zip 32594 3	Country	,	8. This corporation has liability for intangible tax under s. 199,032, Florida Statutes
, 000	9. Name and Address of Current		0		10. Name and Address of New Registered Agent
CUF	RRY, CLIFTON C JR.		81	Name	
750 WEST LUMSDEN BRANDON FL 33509-7143			89 Charl Address (D.O. Cou N. who is Not Assessable)		
			82 Street Address (P.O. Box Number is Not Acceptable)		
			83		
			84	City	85 Zip Code
		2007.4500.51 (1.5)		L	corporation submits this statement for the purpose of changing its registere
SIGNATURE	in familiar with, and accept the obligat	, 			required when reinstating) DATE
2.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TILE		☐ DELETE	1.1 TITLE		President Change Additi
IAME:			1.2 NAME		Talal Kuzbaur
STREET ADORESS			1.3 STREET	ADDRESS	2503 HWY LOE
DIT ST ZIP			1.4 CITY - S	IT-ZIP	Valrice PL 33594
TITLE		☐ DELETE	2.1 TITLE		Change Additi
IAME			2.2 NAME		
STREET ADDRESS				ADDRESS	
DITY - ST - ZIP BILE		DELETE	2. 4 CITY -	ST-ZIP	
NAME		ב_ טנננונ	3.1 TITLE		L_J Change L_J Additi
STREET ADDRESS			3.2 NAME	* PDDDCGG	
STREET AUDINESS			3.3 STREET		
IIITE		DELETE	3.4. CITY- 4.1 TITLE	oi- tir	Change Additi
IAME			4. 2 NAME		The state of the s
STREET ADDRESS			•	ADDRESS	
DITY-ST-7IP			4.4 CITY - 5		
TLF		☐ DELETE	5.1 TITLE		☐ Change ☐ Additi
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET	ADDRESS	
21Y+ST-20P			5.4 CITY - 9	ST- ZIP	
ITLE		☐ DELETE	6.1 TITLE		Change Additi
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET	ADDRESS	
			6.4 CITY - 9		
STREET ADDRESS CITY-ST-7/P TITLE NAME STREET ADDRESS CITY-ST-7/P 14. I do here: informatio I am an of	by certify that the information supplied or indicated on this annual report or su fficer or director of the corporation or t	with this filing does not qualify	5.4 CITY - 9 6.1 TITLE 6.2 NAME 6.3 STREET 6.4 CITY - 9	ADDRESS	Change Add  Add  Add  Add  Add  Add  Add  Add

an attachment with an address.