2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P96000009214

1. Entity Name

M.R.D. FOODS, INC.



FILED Jan 29, 2003 8:00 am Secretary of State 01-29-2003 90157 050 ***150.00

					THE WE THE					
Principal Place of Business 4201 N. OCEAN DR. # 101 BOCA RATON FL 33431 US			Mailing Address 4201 N. OCEAN DR. # 101 BOCA RATON FL 33431 US							
2. Principal Place of Business			3. Mailing Address				4 550 (1005 110 (0)10 0)11 0011 0011 001	1 02 114 00 141 00 1	i e 19110 (1984	MARI B101 1001
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & State			City & State				4. FEI Number 65-0634186			oplied For ot Applicable
Zip Country				Coun				F	ee Require	
6. Name	and Address of Current	Registere					7. Name and Address of New Registered Agent			
	-		Name 5				1			
RAYBIN, MARILYN 4201 N. OCEAN DR.			Street Address			ss (P.O. f	(P.O. Box Number is Not Acceptable)			
	•	,								
BOCA RATON FL 33431					City			FL	Zip Cod	е
		or the purpo	ose of changing its	registere	ed office or regi	stered aç	gent, or both, in the State of Flo	rida. I am fa	miliar with,	and accept
Signature, typed	or printed name of registered agent	and title if appli	icable. (NOT	E: Registere	d Agent signature req	uired when i	einstating)	DATE		
May 1, 200	03 Fee will be \$550.00	of State	State				, •			0 May Be
10. OFFICERS AND			DIRECTORS 11.			Al	DDITIONS/CHANGES TO OFFI	CERS AND I	DIRECTOR	S IN 11
4201 N. C	MARILYN ICEAN DR., #101		☐ Delete	TITLI NAM STRE	ET ADDRESS				_	Addition
S RAYBIN, S 4201 N. C	SCOTT OCEAN DR.		☐ Delete	NAM STRE	EET ADDRESS				Change	☐ Addition
			- Delete -	NAM STRE	ET ADDRESS				Change	Addition
			☐ Delete	NAM STRE	EET ADDRESS		ŧ		Change	☐ Addition
			☐ Delete	NAM STRE	EET ADDRESS				Change	☐ Addition
		Laran	☐ Delete	NAM Stre City	EET ADDRESS -ST-ZIP					Addition
	FL 33431 lace of Busin #, etc. 6. Name fARILYN CEAN DR. FON FL 33- named entitions of regist Signature, typed ILE NOW! May 1, 200 Reayable to PRAYBIN, 8 4201 N. C BOCA RA S RAYBIN, S 4201 N. C BOCA RA	Country 6. Name and Address of Current ARILYN CEAN DR. FON FL 33431 CON FL 33431	FL 33431 FL 33431 BOCA US lace of Business #, etc. Country Country Country Country CEAN DR. CON FL 33431 Inamed entity submits this statement for the purposions of registered agent. Signature, typed or printed name of registered agent and title if applications of registered agent. Signature, typed or printed name of registered agent and title if applications of registered agent. DILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 A Payable to Florida Department of State OFFICERS AND DIRECTOR P RAYBIN, MARILYN 4201 N. OCEAN DR., #101 BOCA RATON FL 33431 S RAYBIN, SCOTT 4201 N. OCEAN DR. BOCA RATON FL 33431	N DR. # 101 BOCA RATON FL 33431 BOCA RATON FL 33431 ILS Suite, Apt. #, etc. City & State Country Zip 6. Name and Address of Current Registered Agent ### ARILLYN CEAN DR. CON FL 33431 Inamed entity submits this statement for the purpose of changing its ions of registered agent. Signature, typed or printed name of registered agent and bite it applicable. NOT ILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 IN Payable to Florida Department of State OFFICERS AND DIRECTORS PRAYBIN, MARILYN 4201 N. OCEAN DR. #101 BOCA RATON FL 33431 S Delete Delete Delete Delete	N DR. # 101 BOCA RATON FL 33431 Boc RATON FL 33431	Mailing Address N DR.	Mailing Address N DR. 4201 N. OCEAN DR. # 101 FL 33431 BCCA RATON FL 33431 US lace of Business 3. Mailing Address W, etc. Suite, Apt. #, etc. City & State 4. Country Zip Country 5. 6. Name and Address of Current Registered Agent 7. Name TARRILYN CEAN DR. City City	Meiling Address N DR 4201 N. OCEAN DR 1 101 FL 33431 BCCA RATON FL 33431 BCCA PATON FL 33431 Clity & State Country Zip Country Zip Country Zip Country T. Name and Address of Street Address of New River Page 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Mailing Address N DR. 40N N OCEAN DR. 9101 BOCA RATON FL 33431 US BOC of Business 3. Mailing Address 4 etc. Suite, Apt. 6 ob. Cay & State	Mailing Address N RR 420 N. OCEAN DR. 4 101 BOCA RATION FL 33431 US 5. Mailing Address 6. etc. Suite, Apt. #, etc. Creck HERE IF MAKING CHANGES 6. Name and Address of Current Registered Agent FL 33431 CR COuntry Aip Country 5. Conflicted of Status Desired \$6.0634186 An inchest Name FARILYN CRAN DR. CRAN DR. CRAN DR. Critical and Address of New Registered Agent FL 2p Cod CRAN DR. Critical and Address of New Registered Agent FL 2p Cod CRAN DR. Critical and Address of New Registered Agent FL 2p Cod Name and Address of New Registered Agent FL 2p Cod Name and Address of New Registered Agent FL 2p Cod Name and Address of New Registered Agent FL 2p Cod Name and Address of New Registered Agent FL 2p Cod Name and Address of New Registered Agent FL 2p Cod Name and Address of New Registered Agent FL 2p Cod Name and Address of New Registered Agent FL 2p Cod Name and Address of New Registered Agent FL 2p Cod Name and Address of New Registered Agent FL 2p Cod Name and Address of New Registered Agent FL 2p Cod Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Crity FL 2p Cod Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Crity FL 2p Cod Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Name and Address of New Registered Agent Name Name Name Name Name Name Name Name

indicated on this report or suppliemental 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 a execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an arrangement with an address, with all other like empowered.

SIGNATURE: