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

PROFIT CORPORATION ANNUAL REPORT

CARANI MEAT, INC.

SIGNATURE: X



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P96000017227 (5)

FILED Jan 22 1997 8:00am Secretary of State

× 1-14-97 x(305)262-2500

Principal Place of Business 2127 BRICKELL AVENUE APT: 3304 MIAMI-FL-89429		Mailing Address 2 <del>127 DRICKELL AVE</del> NUE APT. 3304- M <del>IAMI FL 33129 2105</del> -		3. Date Incorporated or Qualified 3a. Date of Last Report 02/26/1996	
2. Principa' P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 7400	0 NW 7 ST.	26 7400 NW	751	65-0647886	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			¢0.75
22 501	TE # 106	27 SUITE #	106	5. Certificate of Status Desired	Fee Required
City & State  23 MIAMI. FL		City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
23   M   F   Z <sub>(P</sub>	<u> </u>	28 MIAMI	<u> </u>	Trust Fund Contribution	Added to Fees
24 331	26 25 USA	Zip 29 33126	Country 30 USA	8. This corporation has liability for in	tangible tax under s. 199.032, Ves  No
24 0 / 1	9. Name and Address of Current		30 0 0 0 0	Florida Statutes  10. Name and Address of New Reg	
TOD	A ANITEV (ANITE)		81 Name	10, 11011 1103	biolea rigent
	BRICKELL AVENUE		00 0000	(D.O. D. A)	M
APT. 3304			82 Street Addr	ress (P.O. Box Number is Not Acceptable	<b>)</b>
MIAMI FL 33129			83		
			84 City		85 Zip Code
				poration submits this statement for the pu	FLITT
agent + a	m ram (ar with, and accept the obliga Signature, typed or printed name of regularity dages	radionifapphable (NOTE	uthorized by the corporation Statutes.  Registered Agent signature requires		DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	· · · · · · · · · · · · · · · · · · ·
TITLE	D Toda, anita v	☐ DELETE	1.1 TITLE		Change Addition
NAME CASSEL ADSILION	2127 BRICKELL AVE. APT. 3304	1	1.2 NAME		
STREET ADDRESS CITY-S1-ZIP	MIAMI FL 33129		1.3 STREET ADDRESS		
TITLE	nii iii i coote	DELETE	1.4 CłTY - ST - ZIP 2 1 TITLE		Change Addition
NAME		Annual Processing	2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - ZIP			2. 4 CiTY-ST-ZiP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
DITY - ST - ZIP			3.4 CITY-ST-ZIP		
THE		L_1 DECETE	4.1 T(TLE	-	Change Addition
NAME			4.2 NAME		
STREET ADORESS			4.3 STREET ADDRESS		
CITY - S1 - ZIP TITLE		DELETE	4.4 CITY - ST - ZIF 5.1 TITLE	W	D Observe D Address
NAME		[] <i>DELETE</i>	5.2 NAME		Change Addition
STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		
CHTY - ST - 719			5.4 CITY- ST-ZIP		
TITLE		☐ DELETE	61 TITLE		Change Addition
NAME			6.2 NAME	the second second	
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP	market to the second to the se		6.4 CITY - ST - ZIP	6	
information Lam an of	n Pidicated on this annual report of si	ipplemental annual report is tro he receiver or truster empowe	ie and accurate and that ired to execute this repor	l in Section 119.07(3)(i), Florida Statutes, my signature shall have the same legal of t as required by Chapter 607, Florida Sta	offect as if made under eath, that