

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

10/2

FILED

07 AUG 14 AM 9:00

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # P96000029498
1. Corporation Name
A & J INTERNATIONAL FOODS INC

Principal Place of Business Mailing Address

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 210 EAST OCEAN AVE		26 210 EAST OCEAN AVE		APRIL 1, 1996			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22		27		65-0655891		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		8.75 Additional Fee Required	
23 LANTANA, FLORIDA		28 LANTANA, FLORIDA		<input checked="" type="checkbox"/>		<input type="checkbox"/>	
Zip		Zip		6. Election Campaign Financing		5.00 May Be Added to Fees	
24 33462		29 33462		Trust Fund Contribution		<input type="checkbox"/>	
Country		Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
25 PALM BEACH		30 PALM BEACH					

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
				81 Name JOLANTA BERTOLOTTI			
				82 Street Address (P.O. Box Number is Not Acceptable) 210 EAST OCEAN AVE			
				83			
				84 City LANTANA FL 85 Zip Code 33462			

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 Jolanta Bertolotti JOLANTA BERTOLOTTI 8-8-97
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-installing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	P/D ADRIAN BERTOLOTTI
STREET ADDRESS		1.3 STREET ADDRESS	210 EAST OCEAN AVE
CITY-ST-ZIP		1.4 CITY-ST-ZIP	LANTANA, FL 33462
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	S/T/D JOLANTA BERTOLOTTI
STREET ADDRESS		2.3 STREET ADDRESS	210 EAST OCEAN AVE
CITY-ST-ZIP		2.4 CITY-ST-ZIP	LANTANA, FL 33462
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	300002271579
STREET ADDRESS		4.3 STREET ADDRESS	-08/19/97--01081--003
CITY-ST-ZIP		4.4 CITY-ST-ZIP	****173.75 ****173.75
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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: Adrian Bertolotti ADRIAN BERTOLOTTI 8-8-97 (561) 5862912
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/96)

2062

Accounting Management Advisors

Established Since 1968

320 North Dixie Hwy.
Lake Worth, Florida 33460

Tel: (407) 582-3351
Fax: (407) 586-8235

August 8th, 1997

Annual Report Filings
Division of Corporations
Post Office Box 6327
Tallahassee, Fl. 32314

Re: A & J International Foods, Inc.
Document # P96000029498

Gentlemen:

Please find enclosed the subject entity's check in the amount of \$ 173.75 for the Annual Report Renewal and Certificate of Status fees.

For your information the Taxpayers did not receive the Annual Report.

Since I have no actual Report and since I have no documentation from which to read, I have taken the liberty of completing the Report with the new information as "changes".

You have been kind in extending your help in my past dealings and hope you will be understanding in this matter by accepting the client's check without penalty consequence.

Yours truly.


George Boutro