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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF TATE

**FILED** 

Jun 18 1997 8:00am

Secretary of State

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P96000039784 (9)

IRENA B	BUBIK FOODS, INC.	Mailing Address			
3246 EAST BAY DRIVE HOLMES BEACH FL 34217  3246 EAST BAY DRIVE HOLMES BEACH FL 34217		-2044			
				05/03/1996	Date of Last Report
2. Principal P	Place of Business	2a. Mailing Address 26		4. FEt Number 65-0665883	Applied For Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	е	City & State		Etection Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country	8. This corporation has liability for intangit. Florida Statutes Yes	ole tax under s. 199.032,
24	9. Name and Address of Curre		130	10. Name and Address of New Registere	
PIIR	<del></del>		81 Name		
BUBIK, IRENA 3246 EAST BAY DRIVE HOLMES BEACH FL 34217			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
1100	MICO DEMOTT E OTETT	i .	83		
•			84 City	F	85 Zip Code
11. Pulsuant office or r agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the Stalim familiar with, and accept the obli	502 and 607.1508, Florida Statut te of Florida. Such change was a gations of, Section 607.0505, Flo	es, the above-named corp authorized by the corporal orida Statules.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered ppointment as registered
SIGNATURE					
12.	Signature, typed or printed name of registered a	ND DIRECTORS	E Registered Agent signature requi	ired whon reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AI	
TITLE	D	DELFTE	1.1 TITLE	ADDITIONS/OF INVOCED TO OFF IOCHIO AL	Change Addition
NAME	BUBIK, IRENA		1.2 NAME		
STREET ADORESS	1804 75TH STREET WEST		1.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL 34209		1.4 CITY - ST - ZiP		
TITLE		DELFTE	2.1 TITLE		Change Addition
NAME	İ		2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CATY-ST-ZIP			2. 4 C(1 Y - S1 - Z(P		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE :		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		T nourte	4 4 CITY - ST - ZIP		
TITLE		DELETE	5 1 TITLE		Change Addition
NAME OTRECT ADDRESS			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		The original Throughout
STREET ADDRESS			6.3 STHEET ADDRESS		
CITY-ST-7IP			6.4 City-St-7IP		

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Soction 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 of Block 13 if changed, or on an attachment with an address.