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

PROFIT CORPORATION ANNUAL REPORT

1998

DOCUMENT #
1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

P96000058720 (9)

LAREDO & LEFTY FOODS, INC.

Mailino Address

FILED May 06 1998 8:00am Secretary of State



rinicipai riaci		Maining Addition								
15310 AMBERLY DRIVE SUITE 250 TAMPA FL 33647		15310 AMBERLY DRIVE SUITE 250 TAMPA FL 33647								
						DO NOT WRITE IN THIS S	PACE			
IOMEG IE SO	· ·	timi (1 1 6 AAA.)				3. Date Incorporated or Qualified				
						07/10/1996				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For	
21 4615	SWINDELL RD.	26 P. O. Box	4289	تم		59-3391758		No	t Applicable	
	Apt. #, etc. Suile, Apt. #, etc.			1 -			\$8	75 /	dditional	
22		27				5. Certificate of Status Desired	F	ee Re	quired	
City & State	θ	Gily & State				6. Election Campaign Financing	\$5	i.00	May Be	
23 LAKE	LAND FL	28 YLANT CIT	74, <i>1</i>	۴ı	L ,	Trust Fund Contribution			o Fees	
Zip 33	810 Country	Zip	Cbuntr	У		8. This corporation owes or has paid the curr	rent ye	ar Inta	angible	
24 3350	7 25	29 33564-4285	30				Yes	L] No	
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered	igent			
F &	L CORP.		81	1 1	Name					
THE GREENLEAF BUILDING					Street Addre	ess (P.O. Box Number is Not Acceptable)				
200 LAURA STREET										
	CKSONVILLE FL 32202-3527		83	3						
			84	+-	City		DE I	Zip C	ndo	
			64	Ί,	City	FL	85	Zip C	J00 0	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Stalute	s, the abov	ve-n	named corpr	oration submits this statement for the purpose of	chang	ging its	s registered	
office or r	egistered agent, or both, in the State c im familiar with, and accept the obligat	il Florida. Such change was au	ulhorized b	ov 1h	ne corporation	ion's board of directors. I hereby accept the app	ointme	nt as i	registered	
_	in igniliar wirs, and accept the dangar	icina di, addinin 607.0000, Flor	iua Statutt	10.						
SIGNATURE	Signature types or prested name of registered agent	and tile dample above (NOT)	Registered Ac	oent r	signature require	ed when reinstating) DATE				
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRE	CTOR	\$ IN 12	
TITLE	PSD	DELETE	1.1 TITLE				Ch		Addition	
NAME	GARNER, DAVID E		1.2 NAME	:						
STREET ADDRESS	15310 AMBERLY DRIVE, SUITE	250	1.3 STREE		ODRESS					
CITY-ST-ZIP	TAMPA FL 33647		1.4 CITY-							
TITLE	7747777	DELETE	2.1 TITLE				Ch	ange	Addition	
NAME		_	2.2 NAME				_	-		
STREET ADDRESS			2.3 STHEE		nnress					
			2. 4 CITY-							
CITY-ST-ZIP TITLE		☐ DELE TE	3.1 TITLE				Ch	ange	Addition	
NAME			3.1 HILL 3.2 NAME							
					nnorce					
STREET ADDRESS			3.3 STREE							
CITY-ST-ZIP		DELETE	3 4. CITY - 4 1 TITLE		ZR		☐ Ch	ange	Addition	
TITLE							0"	80		
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREE							
CITY-ST-ZIP		DELETE	4.4 CITY-		ZIP		☐ Ch	2000	Addition	
TITLE		☐ DELETE	5.1 TITLE				ᆸᄱ	ធារិជ្ជ	- Addition	
NAME			5.2 NAME							
STREET ADDRESS	h.,		5.3 STREE		i i					
CITY-ST-ZIP			5.4 CITY-		ZIP				14400-	
TITLE	· •	☐ DELETE	6.1 TITLE				☐ Ch	ange	Addition	
NAME			6.2 NAME	2						
STREET ADDRESS	** **		6.3 STREE	E1 AD	ODRESS					
CITY-ST-ZIP		·	6.4 CITY -							
44 thoroby	and by that the information granuling wit	the films does not qualify for	the even	entio	on stated in !	Section 119 07(3)(i) Florida Statutes, Liurther ce	atify th	at the	information	

14. 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.

4/27/00

941-628-000-