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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	MENT # P9600(R'S FINE FOODS, INC.	0058968 (4)				ARRIE ORDER BANKO ARRI ERRO
Principal Place of Business Mailing Address					r indicent cun intid divid native native envir nation hiller	TENIO IDIAN ONION TOLI HOEL
4165 CORP SRUARE NAPLES FL 34104 US		C/O MICHAEL A. BAVIELLO. JR., P.A. 1025 FIFTH AVENUE NORTH NAPLES FL 34102		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/11/1996		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26	26		59-3400360	Not Applicable
		Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27				Fee Required
City & State	9	City & State			6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28 Zip	Country	 _	Trust Fund Contribution	Added to Fees
24	26	├ ─¬	30	ľ	8. This corporation owes or has paid the curr Personal Property Tax due June 30.	ent year intangible] Yes D No
<u> </u>	9. Name and Address of Curren	1	30		10. Name and Address of New Registered A	
RA	VIELLO, JR., MICHAEL A ESQ.		81	Name		
1025 FIFTH AVENUE, NORTH			82	Stroot	Address (P.O. Box Number is Not Acceptable)	- · · · · · · · · · · · · · · · · · · ·
NAPLES FL 34102				Super	Address (F.O. Box Number is Not Acceptable)	
			63			
			84	City		85 Zip Code
			"		FL	11
SIGNATURE	Signature hypod or printed harve of regulated ages				corporation submits this statement for the purpose of poration's board of directors. I hereby accept the apportunity and the purpose of the purpose of poration's board of directors. I hereby accept the apportunity accept the apportunity accept the purpose of th	23/98
TITLE	D	DELETE	1.1 TITLE			Change Addition
NAMÉ	BAVIELLO, MICHAEL A JR.		1.2 NAME	ļ	ALFROD SCHULTL 2377 PNEWDOD CINCLE	
STREET ADDRESS	1025 FIFTH AVENUE, NORTH		1.3 STREET	ADDRESS	NAPIES F1 34/05	
CITY+ST-ZIP	NAPLES FL 34102		1.4 CITY-S	IT-ZIP	, -	
JULTE	PSTD	DELETE	2.1 TITLE	ļ	VP WIT	Change Addition
NAME	WELZEL, RICHARD F.		2.2 NAME	ĺ	PORONT SCHULTZ POU LOGAN BLUIS	
STREET ADDRESS	36 W MOUTN PK RD		2.3 STREET		NAPLES FL 34119	
CITY-ST-ZIP	ETOBICOKE ON	DELETE	2.4 CITY-	$\overline{}$		Change Addition
TITLE NAME	d Kuehn, ida Brandt	A present	3.2 NAME		36. W. MOUNTIAN PK. ROT	year onenife
STREET ADDRESS	2079 SNOOK DR		3.3 STREET	ADDRESS	36. W. MOUNTIAN PK. ROT	•
CITY-ST-ZIP	NAPLES FL		3.4. CITY -		ETOBICOKE CHOTALIU	
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY-S	T-ZIP		
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME	ļ		
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		
TUTLE		DELETE	6 1 TITLE	- 1		Change Addition

6.2 NAME 6.3 STREET AODRESS

I hereby certify that the informati indicated on this annual report officer or director of the corporat Block 12 or Block 13 if charged

STREET ADDRESS CITY - ST - ZIP

with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information that annual roport is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in all of timent with an address

FILED

May 01 1998 8:00am

Secretary of State