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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000062999 (3)

SOUTHEAST FOOD & BEVERAGE BROJKERAGE INC.

Principal Place of Business
6742 WINTERSET GOLDEN ROAD

Mailing Address

6742 WINTERSET GOLDEN ROAD WINTER HAVEN FL 33884

FILED Mar 12 1997 8:00am Secretary of State



2. Principal Place of Business	
Suite, Apt. #, etc.	ate of Last Report
Suite, Apt. #, etc. Suite, Apt. #, etc.	Applied For
Suite, Apt #, etc. Suite, Apt #, etc.	Not Applicable
28 OCALA, FL Zip Country Zip Signature required when reinstaling and signature required when reinstaling signature required when reinstaling) 28 OCALA, FL Zip Zip Zip Zip Zip Zip Zip Zip Zip Zi	\$8.75 Additional Fee Required
Zip Country Zip Country Zip Country 30 USA Florida Statutes Yes Yes Statutes Yes Yes Statutes Yes Yes Statutes Yes	\$5.00 May Be Added to Fees
28 34982 30 USA Florida Statutes Yes 9. Name and Address of Current Registered Agent GOTTSCHALK, RICK 6742 WINTERSET GARDEN ROAD WINTER HAVEN FL 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) WINTER HAVEN FL 83 2 TROPICAL PARK RO 84 City OCALA FL 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 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 apparent Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Stignative byte to precedence of registered agent and the diagraphicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OF FICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11.1 TILE	
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NAME 6.2 NAME	
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CITY-ST ZIP 6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i) Florida Statutes I further	and the state of

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

Rachele Companies) RAENTA CARPENTER

3/7/97 352-86/-188