

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

FILED

Apr 17 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Moynihan Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000066057 (6)
1. Corporation Name
OAK LEAF PREMIUM FOODS, CORP.



Principal Place of Business 3004 29TH AVE., EAST BRADENTON FL 34208	Mailing Address 3004 29TH AVE., EAST BRADENTON FL 34208-7441
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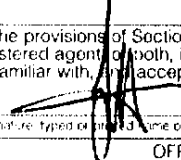
2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29
25	30

3. Date Incorporated or Qualified 08/01/1996	3a. Date of Last Report
4. FEI Number 65-0685684	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
MADDOX, ALBERT F
3010 PINE CLUB DR.
PLANT CITY FL 33567

10. Name and Address of New Registered Agent
81 Name
JACQUELINE HELMSLEY
82 Street Address (P.O. Box Number is Not Acceptable)
7233 NORTH SERENOA DRIVE
83
84 City
SARASOTA FL 85 Zip Code
34241

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 of 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:  JACQUELINE HELMSLEY
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-instating) DATE: 4/14/97

12. OFFICERS AND DIRECTORS

TITLE	D TREASURE	<input type="checkbox"/> DELETE
NAME	RODRIGUEZ, CANDIDO	
STREET ADDRESS	H-25 HARDING STREET, URB PARKVILLE	
CITY-ST-ZIP	GUAYNABO PUERTO RICO	
TITLE	PRESIDENT	<input type="checkbox"/> DELETE
NAME	DAVID HELMSLEY	34241
STREET ADDRESS	7233 NORTH SERENOA DR. SARASOTA, FL.	
CITY-ST-ZIP		
TITLE	SECRETARY	<input type="checkbox"/> DELETE
NAME	BARBARA S. ZAIDMAN	
STREET ADDRESS	41 MIMOSA STREET	
CITY-ST-ZIP	SANTAMANA, RIOPIEDMS, PR. 00928	
TITLE	VICE PRESIDENT	<input type="checkbox"/> DELETE
NAME	ALBERT MADDOX	
STREET ADDRESS	204 TIFTON DR. WEST	
CITY-ST-ZIP	GREENWOOD, SC. 29649	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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:  DAVID HELMSLEY 4/14/97 (941) 752-1262
Signature typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/96)