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PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP

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FLORIDA DEPARTMENT OF STATE

Sandra B. Morthany

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DIVISION OF CORPORATIONS

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FOODS INTERNATIONALE SPECIALITIES, INC.

Principal Place of Business Mailing Address 7700 N.W. 67TH STREET 7790 N.W. 67TH STREET MIAMI FL 33186 MIAMI FL 33168-2702 3. Date Incorporated or Qualified 3a. Date of Last Report 08/26/1996 2. Principal Place of Business 2a. Mailing Address Applied For -0691257 26 Not Applicable 21 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Country Zip Zip 8. This corporation has liability for intangible tax under s. 199.032 Yes 🗌 No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 ESPEJO, JOSE A 7790 N.W. 67TH STTREET 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33166 83 84 City 85 Zip Code Sections 607:602 and 607:1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agreement from bligations of, Section 607.0505, Florida Statutes 11. Pursuant to the provisions of office or registered ager agent. I am familiar with SIGNATURE registered agent and title it applicable (NOTE Registered Agent signature required when reinslating) 12. FICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)13. 🔲 DELFTE 1.1 TITLE Change Addition TITLE ESPEJO, JOSE A NAME 12 NAME 3R2E034 7790 N.W. 67TH STREET STREET ADDRESS 13 STREET ADDRESS **MIAMI FL 33166** CITY-ST-ZIP 14 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIF 2. 4 CITY - ST- ZIP DELETE Change Addition TITLE 3.1 TO LE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 1HUE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - 7k^a DELETE 61 TITLE Change Addition TITLE NAME 62 NAME 63 STREET ADDRESS STREET ADDRESS

6.4 OfTY - \$1 - ZIP

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 eath; that I am an officer or director of the corporation of the corporati

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 certify that the

font with an address.