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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000074355

SOUTHERN SAUCE AND SPICES, INC.

## Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90073 038 \*\*\*158.75



ACKSONVILE FL 3210  JACKSONVILE FL 32210  JACKSONVILE	Principal Place of Business Mailing Address						'"						
2. Principal Place of Business   2a. Melling Address   4. FEI Number   Applied For   NOT APPLICABLE   Applied For   NOT APPL	2935 HARVARD AVE 2935 HARVARD AVE												
2. Principal Place of Business   2a. Mailing Address   4. FEI humby   Applied For Stute, Apt. #, etc.   25. Use, Apt. #, etc.   27. Sulle, Apt. #, etc.   28. Sulle   29. Sulle   28. Sulle   28	JACKSONVILLE FL 32210			JACKSONVILLE FL 32210				DO NOT WRITE IN THIS SPACE					
Principal Place of Business   2a. Melling Address   4. FEI Number   Applied For								3 Date Inc			. , , , ,		
2. Principal Place of Business   2a. Maling Address   3a. Maling Address   4. FEI Number   Applied For   Applied									•			ļ	
Sulle, Apt. #, etc.	2. Division Address										$\Box \Box Z$	Applied For	
Suite, Apt. #, etc.    Suite, Apt. #, etc.   27	Z. Principai Pi	ace of Business	$\vdash$	aning Address							-		
S. Certificate of Status Desired   Fee Required	21]												
City & State  Added to the provision on the current year interpolities  Paramater in the provision of Sections 607 1508, Florida Statuties, the above-named corporation aubmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Statuties, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Statuties, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Statuties, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Statuties, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or poth, in the State of Florida. Statuties, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, and interpolate agent agent agent agent agent agent agent agent	<del></del> 7	#, etc.	$\vdash$	¬ ' '				5. Certifca	te of Status Desired	<b>K</b>			
20   Country   Zip   Country   Zip   Country   R. This corporation ower the current year International Parameter   Viv.   20   Signature   Viv.   20		<del></del>						6 Floation	Campaign Financing		\$5.00	0 May Ro	
Zip   Country   Zip   Country   Zip   Country   St. This corporation owes the current year Intengible   Personal Preparty Tax   Year	¬ '	•	$\vdash$	¬ ·									
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes.  12. Street Address (P.O. Box Number is Not Acceptable)  13. STATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. City  15. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation automits this statement for the purpose of changing its registered agent, or 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, and the appointment as registered agent		Country	<del></del>	Zin Country						rent vear Intar			
9. Name and Address of Current Registered Agent  PLATT, KENNETH 2935 HARWARD AVE JACKSONVILLE FL 32210  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 agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the eligibations of Sections 607.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 appointment as registered office or registered agent. I aminatis with, and cosept the obligations of, Section 07.0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12  14. CITY THE COMPANY OF THE COMPANY	<b>–</b>											<b>Ø</b> No Í	
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ACKSONVILLE FL 32210  83  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered 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 depointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.9505, Florida Statules.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. TITLE							82 Street Address (P.O. Box Number is Not Acceptable)						
### City ###				'									
T1. 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, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, and school the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  Signature, Type or protect name of registered agent and out if applicable (NOTE Registered Agent signature register Addition)  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE D CHANGE 1.1 TITLE CHANGE 1.2 TITLE CHANGE 1.2 TITLE CHANGE 1.3 STREET ADDRESS 1.4 CITY-ST-2P JACKSONVILLE FL 32210							_						
office or registered agent, or both, in the State of Florida. Succion 697-0905, Florida Statutes.  SIGNATURE						84	City			CI	85 Zij	o Code	
office or registered agent, or both, in the State of Florida. Succion 697-0905, Florida Statutes.  SIGNATURE					- 41				ship statement for the	numace of c	hanging	te registered	
ASIGNATURE    SIGNATURE   Superative, typed or printed name of registered sport and title if applicable   (NOTE: Registered Agent signature required when reinstativity)   DATE	office or r	egistered agent, or both, in the State of	Florida, 3	such change was a	⊔tnonzed	ועסנ	ihe corpora	ation's board of di	rectors. I hereby acce	pt the appoint	ment as	registered	
Signature, Typed or printed rams of registrated Agent and title of expiritable (NOTE: Registrated Agent signature required when reinstating)	agent. I a	n familiar with, and accept the obligation	ns of, Se	ction 607.0505, Flo	rida Stat	utes.	·						
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE D PLATT, KENNETH STREET ADDRESS 2935 HARVARD AVE JACKSONVILLE FL 32210   14 CITY-ST-ZP    TITLE D D DELETE 2.1 TITLE   Change Addition    STREET ADDRESS 2935 HARVARD AVE 23 STREET ADDRESS    TITLE D D DELETE 2.1 TITLE   Change Addition    STREET ADDRESS 2935 HARVARD AVE 23 STREET ADDRESS    TITLE D D DELETE 3.1 TITLE   Change Addition    PLATT, HENRIETTA H 22 MANE    STREET ADDRESS 2935 HARVARD AVE 23 STREET ADDRESS    JACKSONVILLE FL 32210   2.4 CITY-ST-ZP    TITLE D D DELETE 3.1 TITLE   Change Addition    PLATT, JOHN P 32 MANE    STREET ADDRESS 2935 HARVARD AVE   33 STREET ADDRESS    CITY-ST-ZP JACKSONVILLE FL 32210   34 CITY-ST-ZP    TITLE NAME   4.2 NAME    STREET ADDRESS    CITY-ST-ZP JACKSONVILLE FL 32210   34 CITY-ST-ZP    TITLE NAME   5.2 NAME    STREET ADDRESS    CITY-ST-ZP JACKSONVILLE FL 32210   34 CITY-ST-ZP    TITLE NAME   5.2 NAME    STREET ADDRESS    CITY-ST-ZP JACKSONVILLE FL 32210   34 CITY-ST-ZP    TITLE NAME   5.2 NAME    STREET ADDRESS    STREET ADDRES	SIGNATURE	·		. "						DATE		{	
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PLATT, KENNETH   12 MANE   13 STREET ADDRESS   2935 HARVARD AVE   13 STREET ADDRESS   14 CITY-ST-ZIP     Change   Addition   Addit			DIRECT			n c	$\overline{}$	ماالطم	HO/OHAHOLO TO OF	110011071110			
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I 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, with all other like empowered.

SIGNATURE: