2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR P96000078777

DOCUMENT # 1. Entity Name

D AND E FOOD BROKERS, INC.



FILED Mar 17, 2003 8:00 am Secretary of State

03-17-2003 90089 046 ***150.00

City & State City & State City & State City & State Country Country 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FISHER, SANDRA 1800 SOUTH OCEAN BLVD. #509 POMPANO BEACH FL 33062 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and site it applicable. (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				S VE I S		0,	OOD BROKERO, "	DANDI
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Country S. Certificate of Status Desired \$8.75 Additional Registered Agent Name FISHER, SANDRA 1800 SOUTH OCEAN BLVD. #509 POMPANO BEACH FL 33062 City FL Zip Code Sireet Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zip Code City FL Zip Code Signature, byped or printed name of registered agent and site it applicable. (NOTE: Registered Agent signature required when renotating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS ITILE NAME SIREET ADDRESS					GALT OCEAN DRIVE	3429 (POMP	3429 GALT OCEAN DR. POMPANO BEACH FL 33308	
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City & State City & State City & State City & State Country Country Country Signature, typed or printed name of registered agent and site if explicable. FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS TITLE OFFICERS ANDRA Sirect Address City State City FL Zip Code Sirect Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zip Code (NOTE. Registered Agent, or both, in the State of Florida. I am familiar with, an amultinar with, an amultinar with, an amultinary in the obligations of registered agent and site if explicable. Note After May 1, 2003 Fee will be \$550.00 Atter May 1, 2003 Fee will be \$550.00 Atter May 1, 2003 Fee will be \$550.00 Atter May 1, 2003 Fee will be \$550.00 After May 1, 2	CHECK HERE IF MAKING CHANGES				, Apt. #, etc.	Suite	Suite, Apt. #, etc.	
FISHER, SANDRA 1800 SOUTH OCEAN BLVD. #509 POMPANO BEACH FL 33062 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent. SIGNATURE S	lied For Applicable		FEI Number 65-0714114	4.	& State	City	City & State	
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CITY-ST-ZIP 12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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