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

Mailing Address

SUITE 104

2425 N COURTENAY PARKWAY

MERRITT ISLAND FL 32953-4181

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

MERRITT ISLAND FL 32953

SUITE 104

2425 N COURTENAY PARKWAY

appears in Block 12 or 8

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000084725 (6)

PALATABLE PEPPER PRODUCTS, INC.

2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For Not Applicable 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc Certificate of Status Desired Fee Regulred 22 City & State City & State 8. Election Campaign Financing \$5.00 May Be **Trust Fund Contribution** Added to Fees 23 Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes 🗶 Yes 🔲 No 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SOILEAU, JOHN L 1970 MICHIGAN AVENUE Street Address (P.O. Box Number is Not Acceptable) BLDG C **B3 COCOA FL 32922** City Zip Code 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, 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, ham fataliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE DATE Stgruture, typical or painted made of ougstored agont and title diapplicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change DELETE Addition 11 TITLE Tilte WATKINS, DANIEL 1.2 NAME CR2E034 NAME 2425 N COURTENAY PARKWAY STE 104 1.3 STREET ADDRESS STREET ADDRESS **MERRITT ISLAND FL 32953** 14 CITY-ST-ZIP OPM-SI-7P DELETE 2 1 TITLE Change Addition 11115 22 NAME NAV3 2 3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP ORY \$1.79 Addition Change DELETE 3 1 TITLE 10165 3.2 NAME NAV 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-\$T-ZIP On S ДP Addition DELETE Change 4.1 TITLE TILLE 4. 2 NAME NAV. STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP C-TY S1 ZIE DELETE Change Addition 5.1 TITLE THE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP City ST-7P DELETE Change Addition 6.1 TITLE TILLE 6.2 NAME NAME STHEET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP 14. To 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 by 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 are an officer or directly of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

FILED Apr 02 1997 8:00am Secretary of State



3. Date Incorporated or Qualified

10/10/1996

3a. Date of Last Report

(96/6)