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FILED

Mar 28 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000085755 (2)

1. Corporation Name

WOLFPACK FOOD CORP.

Principal Place of Business

4399 N.W. 64 AVENUE  
CORAL SPRINGS FL 33067

Mailing Address

4399 N.W. 64 AVENUE  
CORAL SPRINGS FL 33067-3050

3. Date Incorporated or Qualified

10/17/1996

3a. Date of Last Report

2. Principal Place of Business

21 11401 Pines Blvd.

Suite, Apt. #, etc.

22 Suite 516

City & State

23 Pembroke Pines, FL

Zip

24 33026

Country

25 USA

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29

Country

30

4. FEI Number

65-0706732

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

REITANO, ANTHONY J CPA  
3310 W. HILLSBORO BLVD  
DEERFIELD BEACH FL 33442

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*John F. Corradino*

(NOTE: Registered Agent signature required when reinstating)

DATE

3/18/97

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME  
D GRONAS, JOE E  
STREET ADDRESS  
4399 N W 64 AVENUE  
CITY - ST - ZIP  
CORAL SPRINGS FL 33067

1.2 TITLE ☐ DELETE

NAME  
D CORRADINO, JOHN F  
STREET ADDRESS  
4399 N.W. 64 AVENUE  
CITY - ST - ZIP  
CORAL SPRINGS FL 33067

1.3 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

1.4 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

1.5 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

1.6 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 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:

*John F. Corradino*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

954  
435-3544

CR2E034 (9/96)