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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000097737 (6)

MORNINGSTAR FOODS, INC.

FILED Mar 07 1997 8:00am Secretary of State

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Principa! Plac	on of Business	Mailing Address		
,		1815 DURANT ROAD		
1815 DURANT F VALRICO FL 33		VALRICO FL 33594-4527		
				3. Date Incorporated or Qualified 3a. Date of Last Report 11/27/1996
2. Principa! P	Place of Business	2a. Mailing Address		4. FEI Number Applied For
1		26 70 WALTER	SANDERS	
Suite Apt.		Suite, Apt. #, etc. 27 139 (0 N DA	EMABRY	# / 5. Certificate of Status Desired
City & Stat	le		٤	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
_ Zip ¬	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032,
4	25	29 33618	30 <u>45</u>	Florida Statutes X Yes No
	g. Name and Address of Curren	r Hegistered Agent	81 Name	10. Name and Address of New Registered Agent
	ders, walter 10 n. dale mabry hwy, ste. o	AIC .		
	PA FL 33618	1 4 C	82 Stree	at Address (P.O. Box Number is Not Acceptable)
(Cum	1 K £ 00010		83	
			24 0	In I 7. Only
			84 City	FL 86 Zip Code id corporation submits this statement for the purpose of changing its registered proporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Will Jan 100 Signature by led or project name of registered age. OFFICERS AND		: Flegistered Agent signal:	WALTER SANDERS 2-28-97 JE required when reinstating) ADDITIONS/CHANGES TO DEFICERS AND DIRECTORS IN 13
12. THE	D OFFICERS AND	DELETE	13. 1,1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Additio
NAME	MORNINGSTAR, JACKIE A		1.2 NAME	
STREET ADDRESS	1815 DURANT ROAD		1.3 STREET ADORESS	5
City-SI-70	VALRICO FL 33594		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	21 TITLE	Change Additio
NAME	MORNINGSTAR, KENNETH L		2 2 NAME	√ a
STREET ADDRESS	1815 DURANT ROAD VALRICO FL 33594		2.3 STREET ADDRESS	5
CITY-ST-ZIF TITLE	VALRICO PL 33394	DELETE	2 4 CITY+ST-ZIP 3.1 TITLE	☐ Change ☐ Additio
NAME		Prof Deserve	3.2 NAME	- Change - Footile
STREET ADORESS			3.3 STREET ADDRESS	\$
City-St-7IP			3.4. CITY-ST-ZIP	
TELF		DELETE	4.1 TITLE	Change Addition
NAME			4, 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	5
CITY ST-ZIP TILLE		DELETE	4.4 CHY-ST-ZIP 5.1 TITLE	Change Additio
NAME		DEC. 12	5.2 NAME	Vrongo Lad Padroo
STREET ADDRESS			5.3 STREET ADDRESS	s
CHTY - ST - ZIP			5.4 CITY-ST-ZIP	
THUE		DELETE	6.1 TITLE	Change Addilio
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	s
CITY CL 2D	1		CAPITY OF BID	- 1

■ 64CITY-ST-ZIF

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:

SIGNATURE AND TYPED OR PRINTED NAME OF BIONING OFFICER OR DIRECTOR

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