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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 28 1997 8:00am

Secretary of State

Daytime Phone # 0002484

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600098623 (7)

JAMAR FOODS, INC.

Principal Place of Business

SIGNATURE:

10951 NW 3RD ST. CORAL SPRINGS FL 33071		10951 NW 3RD ST. CORAL SPRINGS FL 33071-8117							
						3. Date Incorporated or Qualified 12/04/1996	3a. Da	ite of Last F	Report
·	ace of Business	2a. Mailing Address			4. FEI Number		Aj	pptied For	
Suite, Apt	# Ab	26			65-0721548			ot Applicable	
22 City & State		Suite, Apt. #, etc. 27 City & State			5. Certificate of Status Desired		Fee Required		
23	<i>t.</i>	28]				Election Campaign Financing Trust Fund Contribution			May Be
<u>Ζφ</u>	Country	Zip	Count	ry					to Fees
24	25	29	30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \Boxed No			
	9, Name and Address of Currer	nt Registered Agent				10. Name and Address of New Re	gistered /	Agent	
	LS, BRENDA S		8	1 Na	ame	-			:
	51 NW 3RD ST.		82 Street Addres			ess (P.O. Box Number is Not Acceptab	le)		
COR	IAL SPRINGS FL 33071		8	3					
			L	<u> </u>					
			8	4 Ci	ty		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. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.									
SIGNATURE									
12.	Signative aport or posted name of registeric ago	ont and other it application (NOTE D DIRECTORS	Registered A	gent sig	nature require	ed when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	DIDECTO	DO IN 48
TIME	D .	DELETE	1,1 TULE		T	ADDITIONS/CHANGES TO OFFIC	EHS AND	Change	Addition
NAME	WELLS, BRENDA S	•	1.2 NAM			·		La onango	LL Resilion
STREET ADDRESS	10951 NW 3RD ST.		1.3 STRE		ess				
CITY - ST - ZIP	CORAL SPRINGS FL 33071		1.4 CITY		- 1				
TITLE	PVST	☐ DELETE	2.1 TITLE				***************************************	Change	Addition
NAME	WELLS, BRENDA S		2.2 NAM	E					
STREET ADDRESS	10951 NW 3RD ST.		2.3 STREET ADDRESS		RESS				
CITY - ST - ZIP	CORAL SPRINGS FL 33071	DELETE	2.4 CITY-ST-ZIP		-			T 1 6.	
TITLE	f	L.J DELETE	3.1 TITLE 3.2 NAME			No.	, ped	Change	Addition
STREET ADDRESS J			3.3 STREE		ree l				
DITY-\$1-769			3.4 CITY		l				
TIFLE	DELETE 4.1°						·····	Change	Addition
NAME			4 2 NAM	ΙE				- ·	
STREET ADDRESS			4.3 STRE	ET ADDR	ESS				
City-St-7-2			4.4 CITY	ST-ZIP					
FIFLE		L_] DELETE	5.1 TITLE					Change	Addition
NAME			5.2 NAME	E	-				
STREET ADDRESS			5.3 STRE	et addr	ESS .				
CITY ST - ZiF		DELETE	5.4 CITY-					T 05	
TITLE NAME		☐ DELETE	6 1 TITLE 6 2 NAME					Change	Addition
STREET ADDRESS			63 STREE		ree				
CHY-51-2#			64 City		1.33				
14. I do heret	by certify that the information supplie	d with this filing does not qualify	for the ex	emnti	on stated	in Section 119.07(3)(i), Florida Statutes	3. I further	certify that	the
intermatio Lam an of	m indicated on this annual report or s	supplemental annual report is tru the receiver or trustee empowe	ue and acc red to exe	nirate	and that r	my signature shall have the same lega as required by Chapter 607, Florida S	Laffart ar	if made un	dor oath: that