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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000101987 1. Corporation Name

May 06, 1999 8:00 am Secretary of State

05-06-1999 90207 029 ***150.00

ESSEX	FOODS, INC.							
Principal Place	e of Rusiness	Mailing Address				-{		
Principal Place of Business Mailing Address 8344 A TRENT COURT 8344 A TRENT COURT								
BOCA RATON FL 33433 BOCA RATON FL 33433								
						DO NOT WRITE II	N THIS SPACE	
						3. Date Incorporated or Qualifed		
		A Admin a A defense				01/01/1997 4. FEI Number		hadied Cor
	lace of Business	2a. Mailing Address				1	<u> </u>	Applied For lot Applicable
Suite, Apt.	#	Suite, Apt. #, etc.				65-0714208		Additional
	#, etc.	27				5. Certifcate of Status Desired	,	Required
City & State	е	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	, .	to Fees
Zip	Country	Zip	Cou	intry		8. This corporation owes the current y	ear Intangible	
24	25	29	30			Personal Property Tax.	Yes	□No
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Regis	stered Agent	
				81	Name			
	NG, BRIAN			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
	A TRENT COURT			LL				
BOC	A RATON FL 33433			83				
				84	City		FL 85 Zig	Code
44 Bussiant	to the provisions of Sections 607.050	12 and 607 1508 Florida Stati	ites the ai	hove-r	named corno	pration submits this statement for the purp	ose of changing is	ts registered
office or re	egistered agent, or both, in the State	of Florida, Such change was	authorized	d by th	e corporation	n's board of directors. I hereby accept the	appointment as i	registered
agent. I ar	m familiar with, and accept the obliga	ations of, Section 607.0505, FI	orida Statı	utes.	·	• •		
agent. I ai I SIGNATURE	m familiar with, and accept the obliga	ations of, Section 607.0505, Fi	orida Stati	utes.				
agent. I ai	m familiar with, and accept the obligation of th	ent and title if applicable. (NOT	E: Registered	utes.		when reinstating)	DATE	
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14. 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 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, with all other like empowered.

SIGNATURE: