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PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P97000015105 (4)

## FILED Apr 27 1998 8:00am Secretary of State

INTERNATIONAL FOOD CONSULTING, INC. Principal Place of Business Mailing Address 555 COLORADO AVE. 555 COLORADO AVE. STUART FL 34994 STUART FL 34994 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/17/1997 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 3274 S.E. River Vista Dri Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Port St. Lucie, FL 23 28 Trust Fund Contribution Added to Fees Country Zip Country This corporation owes or has paid the current year Intangible Yes Yes □ No 30 Personal Property Tax due June 30. 24 25 29 34952 USA Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name CRARY, LAWRENCE E III 555 COLORADO AVE. 82 Street Address (P.O. Box Number is Not Acceptable) STUART FL 34994 83 84 City Zip Code 85 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 CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change Addition TITLE DELETE 11 TITLE BALTEAU, GUY NAME 1.2 NAME 3274 S.E. River Vista Drive Port st. Lucie, FL 34952 12 AVE. DES 14 BONNIERS A 8-1325 DION-VIA STREET ADDRESS 1.3 STREET ADDRESS BELGUIM CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 3.1 111LE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Addition TITLE 41 TITLE NAME 4 2 NAME STREET ADORESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

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 cath; 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

GUY

RAITEAU

PRESIDENT

4/8/38

561 223 1448