

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

FILED

Apr 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000053773 (2)

1. Corporation Name
VIENNA FOOD CONNECTION, INC.

Principal Place of Business
272 191ST STREET
NORTH MIAMI BEACH FL 33160

Mailing Address
272 191ST STREET
NORTH MIAMI BEACH FL 33160



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 70 NW 101 ST
Suite, Apt. #, etc.
22
City & State
23 MIAMI SHORES FL
Zip
24 33150
Country
25 U.S.A.

2a. Mailing Address
26 70 NW 101 ST
Suite, Apt. #, etc.
27
City & State
28 MIAMI SHORES FL
Zip
29 33150
Country
30 U.S.A.

3. Date Incorporated or Qualified
06/18/1997

4. FEI Number
65-0767684
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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
FELDMAN, DAVID ESQ
407 LINCOLN ROAD, SUITE 701
MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent
81 Name DAVID FELDMAN ESQ
82 Street Address (P.O. Box Number is Not Acceptable)
407 LINCOLN Rd
83 Suite 701
84 City MIAMI BEACH FL 85 Zip Code 33139

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
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
DP	RUPP, ANTON	272 191ST STREET	NORTH MIAMI BEACH FL 33160	<input type="checkbox"/>
DVST	SWOBODA, MARTIN	272 191ST STREET	NORTH MIAMI BEACH FL 33160	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
DP	RUPP, ANTON	70 NW 101ST	MIAMI SHORES FL 33150	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DVST	SWOBODA, MARTIN	1535 WEST AV #6	MIAMI BEACH FL 33139	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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.

SIGNATURE: *Martin Swoboda* David Rupp Anton - 04 1898 757.5557

CR2E034 (10/97)