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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000055906 (6)

REMBERT FOOD ENTERPRISES, INC.

FILED Feb 27 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					I SANDSAR IND INITE INASE ANGEL AND IN ARTHUR AREA AND IN AREA AND IN ARTHUR AREA AND IN ARTHUR AREA AND IN AREA AND	I BANAD KATAN DONIA DINI ABBA
2018 N.E. 27TH AVENUE 2018 N.E. 27TH AVENUE						
GAINESVILLE FL 32809 GAINESVILLE FL 32809						
				DO NOT WRITE IN THIS SPACE		PACE
					3. Date Incorporated or Qualified	
2. Principal F	Place of Business	2a. Mailing Address			06/25/1997 4. FEI Number	Applied For
21	age of Eddinoss	26			59 - 345 7606	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 Additional
22] 27					6. Certificate of Status Desired	Fee Required
City & Stat	City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip Country		У	8. This corporation owes or has paid the curr	
24 25 29 30 9, Name and Address of Current Registered Agent			0			Yes No
	` _	10. Name and Address of New Registered A	gent			
	UER, FRANK P ESQ		B	Name	· · · · · · · · · · · · · · · · · · ·	
1330-B NW 6TH STREET			8:	Street Add	ress (P.O. Box Number is Not Acceptable)	
G.	NNESVILLE FL 32601		8:			
			84	City	· FL	85 Zip Code
11 Pursuant	to the provisions of Sections 607 050	2 and 607 1508. Florida Statutes	the abor	/e-named corr		changing its registered
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 trile it applicable (NOTE Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE			Change Addition
NAME	REMBERT, DAVIS M		1.2 NAME			[
STREET ADDRESS	2018 N.E. 27TH AVENUE		1.3 STREE	T ADDRESS		i
CITY - ST - ZIP	GAINESVILLE FL 32609		1.4 CITY-	ST-ZIP		
TITLE			2.1 TITLE	-	İ	Change
NAME	REMBERT, JUDITH M		2.2 NAME			
STREET ADDRESS	2018 N.E. 27TH AVENUE			T ADDRESS	<i>"</i>	
CITY-ST-ZIP	GAINESVILLE FL 32609	DELETE	2. 4 CITY	-ST-ZIP		Change Addition
TITLE	REMBERT, DAVIS M III	L.J VELETE	3.1 TITLE	1	'	Change Addition
NAME CTREET ADDRESS	2018 N.E. 27TH AVENUE		3.2 NAME	- 1		
STREET ADDRESS	GAINESVILLE FL-32609		1	T ADDRESS		{
CITY-ST-ZIP TITLE	SAUTE OF SECURE	DELETE	4.1 TITLE	- 51 - ZIP		Change Addition
NAME			4.1 IIILE		·	comings
i .			1	T ADDRESS		
STREET ADDRESS CITY-ST-ZIP			4.4 CITY-			
TITLE		DELETE	5.1 TITLE	DI * ZHF		Change Addition
NAME		- -	5.2 NAME	}		· - {
STREET ADDRESS			8	T ADDRESS		-
CITY-ST-ZIP			5.4 CITY-			
TITLE	-	DELETE	6.1 TITLE			Change Addition
NAME		·	6.2 NAME			
STREET ADDRESS				T ADDRESS		İ
CITY-ST-ZIP			6.4 CiTY-			
						

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 of 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.

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