SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

· 19**9**8

SIGNATURE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P9700063132 (9)

MORNINGSTAR FOODSERVICE, INC.

Principal Place of Business Mailing Address

5889 RODMAN STREET

HOLLYWOOD FL 33023 HOLLYWOOD FL 33023

FILED Oct 08 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

						3. Date incorporated or Qualified	ł				
2. Principal P	2a. Malling Address	dress			07/21/1997 4. FEI Number	Applied For					
21		26				59-3461098	Not Applicable				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State	e	City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
Zip	Country	Zip	Cour	Mry		8. This corporation owes or has paid the cur	rent year Intangible				
24	25	29	30		**********	Personal Property Tax due June 30. Yes No					
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
SELLMAN, ALLEN 5889 RODMAN STREET HOLLYWOOD FL 33023				81 Name 82 Street Address (P.O. Box Number is Not Acceptable)							
								83			
								84	City	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. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.							
				SIGNATURE Stgnature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when relinstating) DATE							
12.			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	D	DELETE	1.1 TITL				Change Addition				
NAME	SELLMAN, ALLEN		1.2 NAM	ΛE	1		Change Ed Hadison				
STREET ADDRESS				1.3 STREET ADDRESS							
CITY-ST-ZIP				1.4 CITY-ST-ZIP		Ì					
TITLE	DELETE			2.1 TITLE			Change Addition				
NAME				2.2 NAME			e onongo				
STREET ADDRESS			2.3 STRE		DORESS						
CITY-ST-ZIP			2.4 CITY	2.4 CITY-ST-ZIP			son .				
TITLE			3.1 TITL	3.1 TITLE			Change Addition				
NAME			3.2 NAM	AE.							
STREET ADDRESS			3.3 STREET ADDRESS		DDRESS		J				
CITY-ST-ZIP			3.4 CITY	Y-ST-Z	IP I						
TITLE		DELETE	4.1 TITL	.E			Change Addition				
NAME			4.2 NAME		}	4000026608	:34				
STREET ADDRESS	ss		4.3 STR	4.3 STREET ADDRESS		-10/09/98010860	3 09				
CITY-ST-ZIP			4.4 CITY	/-ST-Z	IP	***550.0B					
TITLE		DELETE	5.1 TITL	E			Change Addition				
NAME			5.2 NAM	ME			-				
STREET ADDRESS			5.3 STRE	EET AI	DDRESS						
CITY-ST-ZIP			5.4 CITY	Y-ST-Z	P						
TITLE		DELETE	6.1 TITL	.E			Change Addition				
NAME			6.2 NAM	4E			A				
STREET ADDRESS			6.3 STRE	EET A	DDRESS		10.4				
CITY-ST-ZIP			6.4 CITY				700				
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Fjorida Statutes. I further certify that the information indicated on this annual report is the 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 tips corporation or the receiver or tractice impowered to execute this report as required by Chapter 607, Fibrida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607 is bridged for on an attackment with an address.											