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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

\$andra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000090592 (1)

FILED Mar 19 1998 8:00am Secretary of State

	THE HO	OT FOODS COMPANY			E KRONICER ING NEW HEIN BERNEEFIN BEIN GENEE HOUR GENEE BIND DANK HOUR
ı	•	e of Business	Mailing Address		
	05 WAKEFII XRT MYERS		6705 WAKEFIELD DRIVE FORT MYERS FL 33912		
					DO NOT WRITE IN THIS SPACE
\					3. Date Incorporated or Qualified 10/21/1997
2.	Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21			26		65-08 (75 07 Not Applicable
Suite, Apt. #, etc.		#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
City & State		Δ	City & State		Fee Required
23	Oity & State	•	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
	Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24		25		30	Personal Property Tax due June 30. X Yes No M
					10. Name and Address of New Registered Agent
HOULEY, JOHN F					
4532 TAMIAMI TRAIL EAST				82 Street Ac	ddress (P.O. Box Number is Not Acceptable)
	SUITE 401 NAPLES FL 34112			83	,
	1474	125 FC 54112		201	lock 7-0-4
				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.					
agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.					
SIC	SNATURE	Signature, typed or profiled name of registered age	Alore	Registered Agent signature re-	guired when reinstating) DATE
12.			D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITL	Ē	D	DELETE	1.1 TITLE	Director & President & Change Addition
NAM	1E	DELLAGNOLO, HERMAN		1.2 NAME	
STRI	EET ADDRESS	6705 WAKEFIELD DRIVE		1.3 STREET ADDRESS	
	-ST-ZIP	FORT MYERS FL 33912	17 St. 176	1.4 CITY-ST-ZIP	
TITL	•	D HOOLEY TOTAL	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
HAM	EET ADDRESS	HOOLEY, JOHN F 4532 TAMIAMI TRAIL, STE 40	•	2.2 NAME 2.3 STREET ADDRESS	
1	-ST-ZW	NAPLES FL 34112	•	2.4 CITY-ST-ZIP	
TITL			☐ DELETE	3.1 TITLE	Director & SecTreas. □ Change K Addition
NAN	IE			3.2 NAME	Director & SecTreas. ☐ Change
STRI	EET ADDRESS				
	-ST-ZIP		T DELETE	3.4. CITY-ST-ZIP	Fort Myers, FL 33912
TITL	1		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAM	EET ADDRESS			4. 2 NAME 4.3 STREET ADDRESS	and the second s
1	-S1-21P			4.4 CITY-ST-ZIP	
TITL			DELETE	51 TITLE	Change Addition
NAM	IE			5.2 NAME	
STRE	ET ADDRESS			5.3 STREET ADDRESS	
	-ST-Z#P		T Section	5.4 CITY - ST - ZIP	[] N
TITL			☐ DETE1E	6.1 TITLE	Change Addition
NAM	ď	•		6.2 NAME	
SIRE	EET ADDRESS	•		6.3 STREET ADDRESS	

14. Thereby 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 eath; that I am an officer or director of the corporation or the recent of 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 one milliachment with an address.

SIGNATURE:

Heringun Dellagnolo 3/13/98 941-561-571