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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000016065

1. Corporation Name

THA! PEPPER FOOD CORP.

FILED Mar 25, 1999 8:00 am Secretary of State

03-25-1999 90036 026 ***150.00



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Principal Place	of Business	Mailing Address				DI IJER ORIL GUISE (014B1 B111 10B1
2049 UNIVERSITY DRIVE CORAL SPRINGS FL 33071 2049 UNIVERSITY DRIVE CORAL SPRINGS FL 33071					DO NOT WRITE IN TH	IS SPACE	
					3. Date Incorporated or Qualifed		
					02/18/1998		ļ
Principal Place of Business 2a, Mailing Address					4. FEI Number	Apı	plied For
21	26				65-0815155	No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 A	dditional
22	27				5. Certifcate of Status Desired	Fee Re	quired
City & State	State City & State			J (- +	-6. Election Campaign Financing	 \$5.00 :	May Be 🗢
23					Trust Fund Contribution	Added to	o Fees
Zip	Country	⊢ ' ←	ountry	1	8. This corporation owes the current year	Intangible	٧ l
24	25 29 30				Personal Property Tax.		No.
	9. Name and Address of Current	t Registered Agent	-		10. Name and Address of New Registere	a Agent	
BON	HANO LOTTA		81	Name VA	RISARA PONLUANG		
PONLUANG, LITTA			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
2049 UNIVERSITY DRIVE			ļ_	2.0	49 UNIVERSITY DRIVE		
CORA	AL SPRINGS FL 33071		83	1			
			84	City CO	DAT CDDINGC	L 85 Zip C	Code
					RAL SPRINGS F		
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							
3	Signature, typed or printed name of registered agen			nt signature required		AND DIDECTO	DC IN 42
12.			3.		ADDITIONS/CHANGES TO OFFICERS	X Change	Addition
(,	PD	- '	1 TITLE	\ \	VP/D		_ (
NAME	PONEONIO, EITA		2 NAME	T + PPPPEGG			
STREET ADDRESS	## 10 GW 12 10 11 11 11 11 11 11 11 11 11 11 11 11		1.3 STREET ADDRESS 1.4 CITY-\$T-ZIP				
CITY-ST-ZIP	SOURCE OF THIT CO.		4 CITY-S 1 TITLE		P/D	☐ Change	☐ Addition
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NAME	PONEUANO, VANIONNA			TADDRESS			İ
STREET ADDRESS	FOAS CHACHOLL DIAVE						
CITY-\$T-ZIP	COTATE OF THIT CO I E COOT I		4 CITY-:	21-LIF		Change	Addition
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NAME				T ADDRESS			
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NAME		 -	2 NAME				
				TADDRESS .			
STREET ADDRESS			4 CITY-S				
TITLE			1 TITLE			Change	☐ Addition
NAME		5.	2 NAME				ſ
STREET ADDRESS	•	5.	3 STREE	TADDRESS			
CITY-ST-ZIP		5	4 CITY- 9	ST-ZIP			
TITLE		☐ DELETE 6.	1 TITLE			Change	Addition
NAME		6.	2 NAME				ļ
STREET ADDRESS		6	3 STREE	TADDRESS			
OTT OT 710		1 6	4 CITY-S	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 oath; that I am an officer or director of the corporation or the receivenor 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR P TED NAME OF SIGNING OFFICER OR DIRECTOR