

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

FILED  
Mar 23, 1999 8:00 am  
Secretary of State

03-23-1999 90071 016 \*\*\*158.75

DOCUMENT # P98000023480

1. Corporation Name  
U LIKE 2 EAT FOOD, INC.

Principal Place of Business  
1933 S.W. 27TH AVENUE  
SUITE 200  
MIAMI FL 33145

Mailing Address  
1933 S.W. 27TH AVENUE  
SUITE 200  
MIAMI FL 33145

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/12/1998

4. FEI Number

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

\$5.00 May Be  
Added to Fees

Trust Fund Contribution

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 1170 N.W. 11th Street

Suite, Apt. #, etc.

22

City & State

23 MIAMI, FLORIDA

Zip

24 33136

Country

25 USA

2a. Mailing Address

26 1170 N.W. 11th Street

Suite, Apt. #, etc.

27

City & State

28 MIAMI, FLORIDA

Zip

29 33136

Country

30 USA

9. Name and Address of Current Registered Agent

WARNER, KENNETH  
1933 S.W. 27TH AVENUE  
SUITE 200  
MIAMI FL 33145

10. Name and Address of New Registered Agent

81 Name

JIM CHUNG

82 Street Address (P.O. Box Number is Not Acceptable)

1170 N.W. 11th STREET

83

84 City

MIAMI

FL

85 Zip Code

33136

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]*

JIM CHUNG

1/9/99

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 D  
NAME WARNER, KENNETH  
STREET ADDRESS 1933 S.W. 27TH AVENUE #200  
CITY-ST-ZIP MIAMI FL 33145

TITLE P  
NAME JIM CHUNG  
STREET ADDRESS 1170 N.W. 11th STREET  
CITY-ST-ZIP MIAMI, FL 33136

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-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 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, with all other like empowered.

SIGNATURE:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0217889