

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 # P98000040281

1. Corporation Name  
F.E.C. FOODS INC.

Principal Place of Business  
11136 SW 71ST LANE  
MIAMI FL 33173

Mailing Address  
11136 SW 71ST LANE  
MIAMI FL 33173

FILED  
Apr 20, 1999 8:00 am  
Secretary of State

04-20-1999 90149 044 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/04/1998

4. FEI Number

65-0836056

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 6701 SW 116 CT.

26 6701 SW 116 CT.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 402

27 402

City & State

City & State

23 MIAMI-DADE FL.

28 MIAMI-DADE

Zip

Country

Zip

Country

24 33173

25 USA.

29 33173

30 USA.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CASTRO, LUIS A  
11136 SW 71ST LANE  
MIAMI FL 33173

81 Name

JUAN C Gutierrez

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

6701 SW 116 CT #402

83

84 City

MIAMI-DADE

FL

85 Zip Code

33173

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

*Juan C Gutierrez*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME CASTRO, LUIS A  
STREET ADDRESS 11136 SW 71ST LANE  
CITY-ST-ZIP MIAMI FL 33173

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

TITLE D ☐ DELETE  
NAME GUTIERREZ, JUAN C  
STREET ADDRESS 6701 SW 116TH CT APT 402  
CITY-ST-ZIP MIAMI FL 33173

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

TITLE D ☐ DELETE  
NAME RAMOS, RAMON A  
STREET ADDRESS 9897 SW 4TH ST  
CITY-ST-ZIP MIAMI FL 33173

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

TITLE D ☐ DELETE  
NAME GUTIERREZ, JUAN L  
STREET ADDRESS 2301 S OCEAN DR #1708  
CITY-ST-ZIP HOLLYWOOD FL 33019

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

TITLE D ☐ DELETE  
NAME GUTIERREZ, MARTIN J  
STREET ADDRESS 684 SE 8TH PL  
CITY-ST-ZIP HIALEAH FL 33010

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
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:

*Juan C Gutierrez*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4-15-99 (305) 279-6047

Daytime Phone #

CR2E034 (1/1/98)