Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90207 022 ***150.00

DO NOT WRITE IN THIS SPACE

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

Mailing Address

7345 SAND LAKE ROAD #206 ORLANDO FL 32819

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000097050

1. Corporation Name

Principal Place of Business 7345 SAND LAKE ROAD #206

ORLANDO FL 32819

TROTTA'S FOOD COMPANY

					3. Date Incorporated or Qualifed			
	•				11/16/1998			
	lace of Business	2a. Mailing Address		4. FEI Number 54 354	1/0	ied For Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		- 	\$8.75 A			
		27		5. Certificate of Status Desired	Fee Rec			
City & State		City & State			6. Election Campaign Financing	\$5.00 N	lav Re	
23		28			Trust Fund Contribution	1 1	Added to Fees	
Zip	Coun ry	Zip	Cou	intry	8. This corporation owes the current	nt year Intangible	/	
24	25	29	30		Personal Property Tax.		ĺNo	
9. Name and Address of Current Registered Agent					10. Name and Address of New Re	gistered Agent		
SUT	TON, DONALD A			81 Name	DO NALD	Suffor	,	
7345 SAND LAKE ROAD #208				82 Street A	dress (P.O. Box Number is Not Acceptab	le)	Enz 01	
ORLANDO FL 32819				83	680 (UNKOY	A TABLERMI	TRE MU	
One	ANDO 1 L 02019			63				
				84 City	() D I B-4 DO	FL 85 75	3/9	
11. Pursuant	to the provisions of Sections 607,0502	and 607.1508 Florida Statu	es, the a	bove-named co	poration submits this statement for the petion's board of cirectors. I hereby accept	urpose of changing its r	gistered	
office or r	edistered agent, of both, in the State o	i florida. Such ohange was a	uthorized	d by the corpora	etion's board of cirectors. I hereby accept	the appointment as reg	sterea	
	The animal with and accept the congain	Sir, Security of the second	-rica Otta	atos.	,	74/ <i>76/1</i> 99	/	
SIGNATURE	Signatules, broad or printed har ne of registered agent	ind title if applicable. (NOT)	Registered	i Agent signature requ	u red when reinstaling)	DATE 1 - WITH		<u>~</u>
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	CERS AND DIRECTOR	S IN 12	(11/98)
TITLE	PVST	☐ DELETE	1.1 TI	TLE		☐ Change	☐ Addition	ι Ξ
NAME	TROTTA, PASQUALE		1.2 N	AME				
STREET ADDRE :S	TO SE CAME LANCE DOAD HOSE		1.3 STREET ADDRESS					Ш
CITY-ST-ZIP	ORLANDO FL 32819		1.4 CITY-ST-ZIP					R2E034
TITLE	D	☐ DELETE	2.1 TI	TLE		Change	☐ Addition	ပ
NAME	TROTTA, PASQUALE		22 N	AME				
STREET ADDRE 3S	7345 SAND LAKE ROAD #206		2.3 S	TREET ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32819		240	RITY-ST-ZIP				
TITLE	0.10.1100 12.02010	☐ DELETE	3 1 TI	-		Change	Addition	l
NAME			3.2 N	AME				l
STREET ADDRESS	ADDRE IS			TREET ADDRESS			ļ	ı
CITY-ST-ZIP			3.4 CITY-ST-ZIP				Ì	l
TITLE		☐ DELETE	4 1 Ti			☐ Change	Addition	ı
NAME			4.2 N					1
STREET ADDRESS			ı	TREET ADDRESS				i

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 recuired 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.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY-ST-ZIP

54 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

61 TITLE

62 NAME

DELETE

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

mle

NAME

SIGNING OFFICER OR DIRECTOR

Change

Change

Addition

Addition