2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000004499

FILED Oct 18, 2004 Secretary of State

				,	
Entity Name: T & R FOODS, INC.					
Current P	rincipal Plac	e of Business:	New Principal Place o	of Business:	
143 E. NO	BLE AVE				
WILLISTO	N, FL 32696				
Current M	lailing Addra		Now Moiling Address		
Current W	lailing Addre	55.	New Mailing Address	•	
143 E. NOI	BLE AVE N, FL 32696				
WILLISTO	IN, I'L 32090				
FEI Number:	: 59-3553086	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
MYERS, C	HRIS		MYERS, CHRIS		
5505 SW 127 AVE			7701 SW 18TH PLACE		
MICANOP'	Y, FL 32667	US	GAINESVILLE, FL 326	07 US	
	named entity of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE: CHRISI	MYERS		10/18/2004	
	Electro	nic Signature of Registered Age	ent	Date	
		93(2)(b), F.S., the corporation did no	t receive the prior notice.		
	S AND DIREC	•	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	D () Delete	Title:	() Change () Addition	
Name:	MYERS, CHRI	S	Name:		
Address:	7701 SW 18TH		Address:		
City-St-Zip:	GAINESVILLE	, FL	City-St-Zip:		
Title:	D () Delete	Title: (() Change () Addition	
Name:	MYERS, STEF	PHANIE	Name:		
Address:	7701 SW 18Th		Address:		
City-St-Zip:	GAINESVILLE	, FL	City-St-Zip:		
Title:	D () Delete	Title: (() Change () Addition	
Name:	MYERS, MAUF	REEN	Name:		
Address:	5628 SW 104	TERR	Address:		
City-St-Zip:	GAINESVILLE	, FL 32608	City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRIS MYERS PRES 10/18/2004