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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Apr 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S24927

(3)

**SIGNATURE:** 

DOUGLA	is foods, inc.					
Principal Plac	e of Business	Mailing Address	·		1 30011010 150 15051 01505 10150 11051 1601 0	i(Eli Bibi) dibil bibil bibil bibil lobi
915 OAK HILL CEMETARY RD. ARCADIA FL 33821		PO BOX 270 ARCADIA FL 34265-0270 US				
00					Date Incorporated or Qualified     01/15/1991	3a. Date of Last Report 05/01/1996
	Place of Business	2a, Mailing Address			4. FEI Number 50-3046644	Applied For
Suite, Apt. #, etc		Suite, Apt. #, etc.				Not Applicable \$8.75 Additional
		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zφ	Country	Zip	Country	,	B. This corporation has liability for i	intangible tax under s. 199.032,
24	25 29 9. Name and Address of Current Registered Agent		30		Florida Statutes Yes No 10, Name and Address of New Registered Agent	
ICO	RY L. DOUGLAS	nt Hegistered Agent	81	Name	10. Name and Address of New Ne	Sistaten Wastit
	N.E. APPALOOSA STREET		82	Street Add	ress (P.O. Box Number is Not Acceptab	ole)
ARC	ADIA FL 33821					
			83			
			84	' '		FL 85 Zip Code
11. Pursuant office or i agent La	to the provisions of Sections 607.05( registered agent, or both, in the State im familiar with, and accept the oblig	02 and 607.1508, Florida Statute e of Florida. Such change was a ations of, Section 607.0505, Flo	es, the above uthorized by rida Statute	e-named corp the corpora s.	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing its registered at the appointment as registered
SIGNATURE	Signar nei typed or printed hance of registered ag	ert and tillo il applicable. (NOTE	Registered Age	uces stutence ine	ired when reinstating)	DATE
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
THEF	D DELETE DOUGLAS, JERRY LEE 3135 NE EDWARDS		1.1 TITLE 1.2 NAME 1.3 STREET ADORESS			☐ Change ☐ Addition
NAMÉ						
STREET ADDRESS						
CITY - ST - 7IP TITLE	ARCADIA FL  DELETE		1.4 CITY-ST-ZIP 2.1 TITLE			Change Addition
NAME	DOUGLAS, LINDA LOU		22 NAME			
STREET ADDRESS	3135 NE EDWARDS		2.3 STREET ADDRESS			
CITY+ST-ZiP	ARCADIA FL		2.4 CITY-ST-ZIP			
T:TLE			3.1 TITLE			Change Addition
NAME DIGGGG LDDDGGG	AUMENT, KIM 405 N. ARCADIA AVE.		3.2 NAME			
STREET ADDRESS CITY+ST-ZIP	ARCADIA FL		3.3 STREET	1		
TITLE			4.1 TITLE	21.51		Change Addition
NAME	AUMENT, CRAIG	4.21				·
STREET ADDRESS	405 N. ARCADIA AVE.		4.3 STREET ADDRESS			١
DITY-ST-7IP	ARCADIA FL		4.4 CITY-5	ST-ZIP		
101.6			5.1 TITLE			☐ Change ☐ Addition
NAM:			5.2 NAME			
STREET ADUPESS			5.3 STREET			
TITLE		☐ DELETE	5.4 CITY-S 6.1 TITLE	31-217	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			6.2 NAME			····· • —
STREET ACIDRESS	1			T ADDRESS		\$

64 CITY-ST-ZIP 14. I do 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 3 it changed, or on an attachment with an address.