

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 4:56

DOCUMENT # S36530

(1)

1. Corporation Name

GAVILAN CHICKEN, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

2222 N. FEDERAL HIGHWAY
DELRAY BEACH FL 33483

Mailing Address

2222 N. FEDERAL HIGHWAY
DELRAY BEACH FL 33483

(Do Not Write in This Space)

3. Date incorporated or qualified	3a. Date of last report
03/08/1991	08/30/1994
4. FEI Number	Applied For
65-0250451	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 has liability for intangible tax under s. 190.05, Florida Statutes	☐ Yes ☒ No

2. Principal Place of Business	2b. Mailing Address
21 State Apt # etc	26 State Apt # etc
22 City & State	27 City & State
23 Zip	28 Zip
24	25
29	30

9. Name and Address of Current Registered Agent

GAVILAN, JUAN
2222 N. FEDERAL HIGHWAY
DELRAY BEACH FL 33483

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607 (0302) 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 of current registered agent or officer of the corporation)

(Signature of new registered agent or officer of the corporation)

(Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PVT	1. TITLE	☐ Change ☐ Addition
NAME	GAVILAN, JUAN	2. NAME	
STREET ADDRESS	2222 N. FEDERAL HIGHWAY	3. STREET ADDRESS	
CITY, ST, ZIP	DELRAY BCH FL	4. CITY, ST, ZIP	
TITLE	S	21. TITLE	☒ Change ☐ Addition
NAME	JIMENEZ-PAGES, OSVAIDO	22. NAME	
STREET ADDRESS	8150 SW 8TH ST, 211	23. STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL	24. CITY, ST, ZIP	
TITLE	V	31. TITLE	☐ Change ☐ Addition
NAME	CASTRILLO, ORLANDO	32. NAME	
STREET ADDRESS	11211 S. MILITARY TRAIL	33. STREET ADDRESS	
CITY, ST, ZIP	BOYNTON BEACH FL	34. CITY, ST, ZIP	
TITLE		41. TITLE	☐ Change ☒ Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY, ST, ZIP		44. CITY, ST, ZIP	
TITLE		51. TITLE	☐ Change ☐ Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY, ST, ZIP		54. CITY, ST, ZIP	
TITLE		61. TITLE	☐ Change ☐ Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY, ST, ZIP		64. CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.02(3)(b), Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the manager 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 of this report, or on an attachment with an addition.

SIGNATURE:

(Signature and typed name of director, officer or director)

4/28/95

407 274 4161
(Tallahassee Office)