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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

APPROVED
AND
FILED

95 FEB 29 AM 9:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S40349** (0)

1. Corporation Name

RICCA FOODS INC.



Principal Place of Business

**330 SW 27 AVE
S304
MIAMI FL 33135**

Mailing Address

**330 SW 27 AVE
S304
MIAMI FL 33135**

3. Date Incorporated or Qualified
03/25/1991

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SANCHEZ, ALTAGRACIA
330 SW 27 AVE
S304
MIAMI FL 33135**

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 607.0502 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

(Signature, typed or printed name of registered agent and title, if applicable)

(Name of Registered Agent if signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **D** ☐ DELETE

STREET ADDRESS **MAKDY, JOHN RICK**

CITY-ST-ZIP **1201 S. ORLANDO AVE. #408**

WINTER PARK FL

TITLE ☐ DELETE

NAME **MD** ☐ DELETE

STREET ADDRESS **SANCHEZ, ALTAGRACIA**

CITY-ST-ZIP **5101 SW 137 CT**

MIAMI FL

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

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TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME **Kazuaki Yoshimura** ☐ Change ☐ Addition

1.3 STREET ADDRESS **330 SW 27 ave #304** ☐ Change ☐ Addition

1.4 CITY-ST-ZIP **Miami, FL 33135** ☐ Change ☐ Addition

2.1 TITLE **Secretary / Director** ☐ Change ☐ Addition

2.2 NAME **Altagracia Sanchez** ☐ Change ☐ Addition

2.3 STREET ADDRESS **9240 SW 149 St. Mia FL** ☐ Change ☐ Addition

2.4 CITY-ST-ZIP **33193** ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME ☐ Change ☐ Addition

3.3 STREET ADDRESS ☐ Change ☐ Addition

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME ☐ Change ☐ Addition

4.3 STREET ADDRESS **000001729900** ☐ Change ☐ Addition

4.4 CITY-ST-ZIP **-03/04/96-01003-016** ☐ Change ☐ Addition

*****208.75 ***208.75** ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME ☐ Change ☐ Addition

5.3 STREET ADDRESS ☐ Change ☐ Addition

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME ☐ Change ☐ Addition

6.3 STREET ADDRESS ☐ Change ☐ Addition

6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 attached report with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

CORPORATE PHONE

CR2E034 (12/95)