

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

FILED
Feb 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **S73315**
1. Corporation Name
ALFONSO GOURMET PASTA, INC.

(1)



Principal Place of Business

1100 S. POWERLINE RD.
DEERFIELD BEACH FL 33442
US

Mailing Address

1100 S. POWERLINE RD.
DEERFIELD BEACH FL 33442
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/14/1991

4. FEI Number

16-0323631

Applied For

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

21 2211 NW 30th Place

State, Apt. #, etc.

22

City & State

23 Pompano Beach, FL

Zip

24 33069

Country

25

9. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES, INC.
1201 HAYES STREET
TALLAHASSEE FL 32301

2a. Mailing Address

26 2211 NW 30th Place

State, Apt. #, etc.

27

City & State

28 Pompano Beach, FL

Zip

29 33069

Country

30

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 601, 602, and 607, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered
office or registered agent in the State of Florida. Each 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 Sections 602, 607, Florida Statutes.

SIGNATURE

Signature of the Registered Agent (required when the corporation is changing its registered agent)

Signature of the Registered Agent (required when the corporation is changing its registered office)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

PT
LOCKE, JEFFREY A
4130 GEORGE WAY
BOCA RATON FL 33434
VPS
LOCKE, JOHN E
831 DOVER ST.
BOCA RATON FL 33487

☐ DELETE

☐ DELETE

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☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY, ST, ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing 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 new or former registered agent, and that my name appears in
Block 12 or Block 13 of this filing, or in Block 14 of this filing, or in Block 15 of this filing.

SIGNATURE:

Jeffrey A. Locke

JEFFREY A. LOCKE, PRES

2-6-98

954 960 1010

CR2E034 (10/97)