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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # **V08242**
1. Corporation Name
AMERICAN FOOD MANUFACTURING CORP.

Principal Place of Business Mailing Address
1781 W 32ND PL HIALEAH, FL 33012 **P.O. BOX 52-4183 MIAMI, FL 33152-4183**

500001459695
-04/18/95--01126--005
****208.75 ****208.75
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1781 W. 32nd PLACE		2a. Mailing Address 26 P.O. BOX 52-4183		3. Date Incorporated or Qualified 01/21/1992		3a. Date of Last Report 07/01/94	
22 N/A		27 N/A		4. FBI Number 65-0360762		Applied For Not Applicable	
23 HIALEAH, FL 33012		28 MIAMI, FL		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 33012		25 U. S. A.		29 33152-4183		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent JOHN ESTANISLAU 1781 W. 32ND PLACE HIALEAH, FL 33012				10. Name and Address of New Registered Agent			
81 Name JUAN C. RIVERO				82 Street Address (P.O. Box Number is Not Acceptable) 7335 N.W. 31TH STREET			
83 P.O. BOX 52-4183				84 City MIAMI			
				85 FL		85 Zip Code 3122-1240	

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  **JUAN C. RIVERO, PRESIDENT** **03/04/95**
Signature (print or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when registering) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE C/T	NAME RIVERO, JORGE, H.	11 TITLE C/T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CLUB ATLANTIS, 2555 COLLINS AVE	CITY - ST - ZIP # 2406, MIAMI BCH, FL	12 NAME	
TITLE P/D/S	NAME ESTANISLAU, JOHN	13 STREET ADDRESS 10900 SW 141ST AVE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 14201 SW 100TH LANE	CITY - ST - ZIP MIAMI, FL	14 CITY - ST - ZIP MIAMI, FL 33186	
TITLE V/D	NAME ESTANISLAU, MARIA DA GLORIA	31 TITLE V/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 14201 SW 100TH LANE	CITY - ST - ZIP MIAMI, FL	32 NAME	
TITLE V/D	NAME RIVERO, JUAN CARLOS	33 STREET ADDRESS 10900 SW 141ST AVE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CLUB ATLANTIS 2555 COLLINS AVE	CITY - ST - ZIP # 2206, MIAMI BCH, FL	34 CITY - ST - ZIP MIAMI, FL 33186	
TITLE V/D	NAME RIVERO, JORGE H., JR.	41 TITLE P/S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CLUB ATLANTIS, 2555 COLLINS AVE	CITY - ST - ZIP # 2206, MIAMI BCH, FL	42 NAME	
TITLE	NAME	43 STREET ADDRESS 433 W 45TH PLACE	
STREET ADDRESS	CITY - ST - ZIP	44 CITY - ST - ZIP HIALEAH, FL 33012	
TITLE	NAME	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY - ST - ZIP	52 NAME	
TITLE	NAME	53 STREET ADDRESS	
STREET ADDRESS	CITY - ST - ZIP	54 CITY - ST - ZIP	
TITLE	NAME	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY - ST - ZIP	62 NAME	
TITLE	NAME	63 STREET ADDRESS	
STREET ADDRESS	CITY - ST - ZIP	64 CITY - ST - ZIP	

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 110.07(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 attachment with an address.

SIGNATURE:  **JUAN C. RIVERO, PRESIDENT** **03/04/95** (305)-477-1600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Handwritten: JW 4-18-95