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

FILED Apr 02 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #
1. Corporation Name CLASSIC FOOD MARKETING, INC. Principal Place of Business Mailing Address 61404 EDGEWATER DRIVE 61404 EDGEWATER DRIVE ORLANDO FL 32810 ORLANDO FL 32810 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/28/1992 2a, Marling Address 2. Principal Place of Business FEI Number Applied For 21 59-3107505 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name VETTER, JOHN P. **5067 STONE HARBOR ROAD** 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32808 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutos, 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 (NOTE: Registered Agent signature required when reinstating) (10/97) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change DELETE TITLE 1.1 TITLE VETTER, JOHN P NAME 1.2 NAME 5067 STONE HARBOUR RD STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE VETTER, ANNA NAME 2.2 NAME **5067 STONE HARBOUR RD** 2.3 STREET ADDRESS STREET ADDRESS Orlando fl CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE VETTER, JOHN P III NAME 3.2 NAME 315 BELLE VIEW AVE STREET ADDRESS 3.3 STREET ADDRESS **TEMPLE TERRACE FL** 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change TITLE 4.1 TITLE VETTER, STEVEN P NAME 4. 2 NAME 4980 Lacaya Way Orlando, FL 32808 169-E RIVERBEND DRIVE STREET ADDRESS 4.3 STREET ADDRESS altamonte springs fl 4.4 City-St-ZiP CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. Thereby 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 13 if changed, or an attachment with an address.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

TITLE

NAME

STREET ADDRESS

DELETE

3/20 80

102-202-3000

Change

Addition