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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

(9)

RIVIERA FOOD SERVICES, INC.

Principa! Place of Business	Mailing Addres

11011 S.W. 27TH STREET DAVIE FL 33328

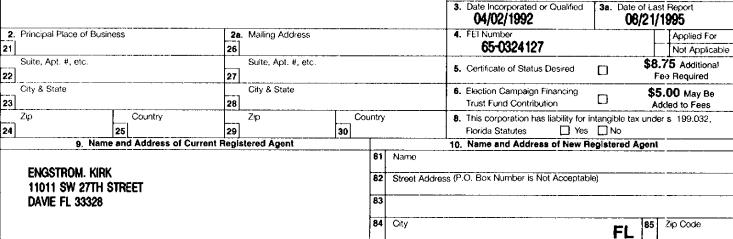
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Mailing Address

11011 S.W. 27TH STREET DAVIE FL 33328



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 _		NOST ROM	U.P. 9/29/96	
Signature, typed or printed in the Stregistered agent and tine it applicable (NOTE: Bogistered Agent eignature required when revisitating) DATE				
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP DELETE	1. 1 TITLE	☐ Change: ☐ Addition	
NAME	ENGSTRUM, MARY JO	1.2 NAME		
STREET ADDRESS	11011 S.W. 27TH STREET	1.3 STREET ADDRESS		
CITY-ST-ZIP	DAVIE FL	1.4 CITY-ST-ZIP		
TITLE	DVS CT DELETE	2 17(1) 5	Change Maddition	

ENGSTRUM, KIRK NAME 2.2 NAME 11011 S.W. 27TH STREET STREET ADDRESS 2.3 STREET ADDRESS DAVIE FL CITY-ST-ZIP 24 CITY-ST-ZIP □ DELETE TITLE 3 1 TITLE Change ☐ Addition ENGSTRUM, KIRK NAME 3.2 NAME 11011 S.W. 27TH STREET STREET ADDRESS 3.3. STREET ADDRESS DAVIE FL CITY-ST-ZIP 34 CITY-ST-ZIP TITLE DELETE Change Addition 4 1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-\$T-ZIP 4.4 CITY-ST-ZIP TITLE

□ DELETE 5 1 TITLE Change Addit on NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP THLE ☐ DELETE 6. 1 TITLE Change Addition NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 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 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 attachment with an address.

STREET ADDRESS

OF SIGNING OFFICER OR DIRECTOR

4/24/36 (954) 477-4/97

CR2E034 (12/95)