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

NAME

STREET ADDRESS

officer or director of the corporation of the receiver or trustee empower Block 12 or Block 13 if changed, or of an attachment with an address

CITY-ST-ZIP

Apr 14 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # V42181 (0)FLORIDA NATURAL PET FOODS, INC. Principal Place of Business Mailing Address 2284 NORTHWEST 30TH PLACE 2284 NORTHWEST 30TH PLACE POMPANO BEACH FL 33069 POMPANO BEACH FL 33069 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/09/1992 2. Principal Place of Business Mailing Address Applied For 21 P.O. BOX 65-0337251 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Country Zip 8. This corporation owes or has paid the current year Intangible Yes [] No Personal Property Tax due June 30. 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent A1 Name CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) 82 **PLANTATION FL 33324** В3 City 84 85 Zip Code FL 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statules. SIGNATURE (NOTE Registered Agent's guature required when reinstating) Signature, typed or profed name of registers Lagent and the it applicant CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. □ DELETE Addition ☐ Change TITLE 1.1 THLE **BUTTES, GEORGE** 1.2 NAME NAME 2284 N.W. 30TH PLACE STREET ADDRESS 13 STREET ADDRESS POMPANO BEACH FL CITY-ST-ZIP 1.4 CHY-ST-7IP Change DELETE Addition TITLE 2.1 TITLE TAYLOR, JEFFREY NAME 2.2 NAME 16321 E. ARROW HIGHWAY STREET ADDRESS 2.3 STREET ADDRESS **IRWINDALE CA** CITY-ST-ZIP 2 4 CHY- S1-7IP DELETE Change Addition TITLE 3.1 TITLE NAME TAYLOR, RICK 3.2 NAME 16321 E. ARROW HIGHWAY STREET ADDRESS 3.3 STREET ADDRESS IRWINDALE CA CITY-ST-ZIP 3.4. CITY - \$1 - 7/P TITLE DELETE 411PLE Addition 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS City-St-ZIP 4.4 CHY - \$1 - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - ZIP 🔲 DELETË 6 1 TITLE Change Addition TITLE

6.2 NAME

6.3 STREET ADDRESS

Rick S. Taylor

04/03/98

6 4 CHY-ST-710 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. 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 Statutos; and that my name appears in

FILED