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

FILED Apr 27 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (2)V69527 JIM-GLO FOOD SERVICE INC. <u>1 (80) (1414 144) (144</u> Principal Place of Business Mailing Address 1641 N COCOA BLVD. 1954 GLEN MEADOWS CIRCLE COCOA FL 32927 MELBOURNE FL 32835 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/05/1992 2. Principal Place of Business 2a. Mailing Address Applied For 26 59-3145310 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6, Election Campaign Financing П 23 Trust Fund Contribution Added to Fees 28 Zıp Zιρ Country Country This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. Yes ☐ No 24 25 30 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KENNEY, JAMES B. 1954 GLEN MEADOWS CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) MELBOURNE FL 32935 83 84 City Zip Code 85 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 lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed name of registered agent and title it applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1 1 TITLE Change Addition FLOOD, GLORIA D 1.2 NAME CR2E034 NAME 1954 GLEN MEADOWS CIR. STREET ADDRESS 1.3 STREET ADDRESS MELBOURNE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 21 TITLE TITLE KENNEY, JAMES B NAME 2.2 NAME 1954 GLEN MEADOWS CIR. STREET ADDRESS 2.3 STREET ADORESS MELBOURNE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-SY-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE 6.2 NAME

DELETE

14. Thereby certify that the information supplied with this filling 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 corporatem on 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 chapted, or on an attachment with an address. SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

Anril ru, 1998

Change

Addition

(10/97