

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

FILED
Feb 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # G34927 (5)

1. Corporation Name

RAHESA-FARMS INC.

Principal Place of Business

Mailing Address

**17630 S.W. 56th Street % Gustavo Diez
Fort Lauderdale FL 33331 3321 S.W. 114 Court
Miami, FL 33165**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

4/19/1983

4. FEI Number **59-2341258**

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30 ☐ Yes ☒ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

**Hauser, Terry V.
444 Brickell Ave. Suite 1000
Miami, FL 33131**

11. Pursuant to the provisions of Sections 607.0505 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

(Signature, typed or printed name of registered agent and the corporation)

(NOTE: Registered Agent Signature Required when terminating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**V/D
Toca, Ramon, Jr
17630 S.W. 56th Street
Fort Lauderdale, FL 33331**

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**S/D
Toca, Hector
17630 S.W. 56th Street
Fort Lauderdale, FL 33331**

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**T/D
Toca, Sara Elena
17630 S.W. 56th Street
Fort Lauderdale, FL 33331**

☐ DELETE

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP
21 TITLE

☐ Change ☐ Addition

22 NAME
23 STREET ADDRESS
24 CITY, ST, ZIP
31 TITLE

☐ Change ☐ Addition

32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP
41 TITLE

☐ Change ☐ Addition

42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP
51 TITLE

☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP
61 TITLE
62 NAME
63 STREET ADDRESS

☐ Change ☐ Addition

64 CITY, ST, ZIP

**700002423017
-02/06/98--01002--044
***158.75**

14. I hereby certify that the information furnished with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this annual report is a true and accurate report 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; 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/98

305 559 4685

CR2E034 (10/97)