FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT* CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	REPORT 96	Secretar	y of State CORPORATIONS		
DOCUME 1. Corporation Nar		5 (7)			
J R PRO	DUCE CORP.				
Principal Place of B	Business	Mailing Address			
17500 S.W. 147TH AVENUE MIAMI FL 33177		33 EAST 12TH STREET HIALEAH FL 33010			
				 Date Incorporated or Qualified 12/27/1989 	3a. Date of Last Report 03/16/1995
2. Principa! Place o	of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0425599	Not Applicable
Suite, Apt. #, etc	C.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5 00 May Bo
23	Country	28		Trust Fund Contribution	Added to Fees
24	25)	Ζφ 29	Country 30	8. This corporation has liability for in Florida Statutes Yes	ntangible tax under s. 199.032,
9. Name and Address of Current Registered Agent				10. Name and Address of New Re	
			81 Name	VE/SE MENDE	5
Mendez, raul 33 east 12th Street				fress (P.O. Box Number is Not Acceptable	
HIALEAH F			83		
			1 3 m		
			84 City #1	Inted	FL 85 Zip Code 3 7 6/52
11. Pursuant to the or registered ag	provisions of Sections 607.0502 a gent, or both, in the State of Florida accept the obligations of Section	p 607.0505, Florida Statutes.	the above named corporation's boa	ration submits this statement for the purpard of directors. I hereby accept the appoint	FL 376/0
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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 attackment with an address.

GNATURE:

GNATURE:

SIGNATURE:

STATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

1/18/96 Daylina Pron: #