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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700086677 (6)

PLANTS 4 U CORP.

SIGNATURE: X

FILED Apr 13 1998 8:00am Secretary of State

908-740-1190

| ` | | | | | | |
|---|------------------------------|------------------------------------|--|----------------------------|---------------|--|
| Principal Place | e of Business | Mailing . | Address | | • | I AUDITADA ING INGAN NORMA DUMA KUMAN DUMA DUMA BUMA DINAK KUMAN KUMA |
| 1825 SPRING GARDEN AVENUE DELAND FL 32720 | | | 1825 SPRING GARDEN AVENUE DELAND FL 32720 | | | |
| | | | | | | DO NOT WRITE IN THIS SPACE |
| | | | | | | 3. Date Incorporated or Qualified 10/07/1997 |
| | lace of Business | 2a. Maile | ng Address | | | 4. FELNumber Applied For |
| 21 | | 26 | | | | 59-347 4/60 Applied For Not Applied For |
| Suite, Apt. | #, etc. | | , Apt. #, etc. | | | 5. Certificate of Status Desired \$8.75 Additional Fee Regulred |
| City & State | <u> </u> | 27 City | & State | | | |
| 23 | · | 28 | a ottalo | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |
| Zip | Country | | | Country | , | 8. This corporation owes or has paid the current year Intangible |
| 24 | 25 | 29 | 30 |][| | Personal Property Tax due June 30. Yes No |
| | | ss of Current Registered | Agent | | | 10. Name and Address of New Registered Agent |
| PAI | CHECO, ADA | | | 81 | Name | me |
| J | LOS ALTOS WAY | | | 82 | Street | eet Address (P.O. Box Number is Not Acceptable) |
| • | T 204 Famonte springs i | 1 22714 | | 83 | | |
| , ,,,,, | MINORIE OFFICE | L 027 14 | | | - A.: | |
| | | | | 84 | City | FL 85 Zip Code |
| 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 rigority to 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. Lam fairly land accept the operation of the section 607.0505, Florida Statutes. | | | | | | |
| SIGNATURE Signature, typed oth critical critical columns of repostures agent and title of agent agent and title of agent agent and title of agent | | | | | | |
| 12. | | FICERS AND DIRECTORS | 3 | 13. | , | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | MANAGEN | | DELETE | 11 TITLE | , | ☐ Change ☐ Addition |
| NAME | RAFAEL | MA CHADO | Hans | 1.2 NAME | | |
| STREET ADDRESS | 322 LUS | MACHADO ALTUS WAY BARINGS FL | 7004 | 1.3 STREET | ADDRESS | :SS |
| CITY-ST-ZIP | ALTA MONTE | SPRINGS FL | 33/4-316 | | T-ZIP | |
| TITLE | | | ☐ DELETE | 21 TITLE | | Change L Addition C |
| NAME | | | | 2.2 NAME | | |
| STREET ADDRESS | | | | 2.3 STREET | ADDRESS | :88 |
| CITY-ST-ZIP | | | I Doubte | 2.4 CITY- | ST-ZIP | |
| TITLE | | | ☐ DELETE | 3.1 TITLE | | L] Change L] Addition |
| NAME CTRCCY ADDRCCS | | | | 3.2 NAME | ***** | |
| STREET ADDRESS | | | | 3.3 STREET | | iii f |
| CITY-ST-ZIP TITLE | | | DELETE | 3.4. CITY - 5 4.1 TITLE | 51-212 | Change Addition |
| NAME | | | | 4. 2 NAME | | - Volution |
| STREET ADDRESS | | | | 4.3 STREET | ADDRESS. | 200 |
| CITY-ST-ZIP | | | | 4.4 CITY-S | | |
| TITLE | | | DELETE | 51 TITLE | , <u>.</u> ,, | ☐ Change ☐ Addition |
| NAME | | | | 5.2 NAME | | |
| STREET ADDRESS | | | | 53 STREET | ADDRESS | ess |
| CITY-ST-ZIP | | | | 5.4 CITY-S | | |
| TITLE | | | DELETE | 6.1 TITLE | - | Change Addition |
| NAME | | | | 6.2 NAME | | |
| STREET ADDRESS | | | | 6.3 STREET | ADDRESS | :ss |
| CITY-ST-ZIP | | | | 6.4 CITY-S | | |
| 14. I hereby o | certify that the information | n supplied with this filing d | oes not qualify for t | | | stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information |