PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 207398

1. Corporation Name

PARKER BANANA COMPANY

Principal Place of Business Mailing Address						,	
1801A EAST SAHLMAN DRIVE 1801A EAST SAHLMAN DRIVE TAMPA FL 33605 TAMPA FL 33605			Æ				
					DO NOT WRITE IN THIS	SPACE	
					 Date Incorporated or Qualified 12/01/1957 		
Principal Place of Business 2a. Mailing Address					4. FEI Number	Ap	plied For
21 26					59-0819398	No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	\$8.75 A Fee Re	
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23 28					Trust Fund Contribution	Added t	, ,
Zip	Country Zip Cou		Country	/	8. This corporation owes the current year Inta	ıngjible	
24	25	29	30		Personal Property Tax.	☑ Yes	□No
Name and Address of Current Registered Agent				,	10. Name and Address of New Registered A	gent	
OALITT COMMAND O				Name			
SAVITZ, EDWARD O			82	Street Add	Iress (P.O. Box Number is Not Acceptable)		
1028 S. STERLING							
TAMPA FL 33629			83	}			
			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 recoffice or registered agent. In the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registagent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.							registered gistered
SIGNATURE Signature: Typod or prilliged name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE DATE							
12.		AND DIRECTORS	13.	in agratoro rodon	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	DRS IN 12
TITLE			1.1 TITLE			☐ Change	Addition
NAME			1.2 NAME				
STREET ADDRESS			1.3 STREE	T ADDRESS			
CITY-ST-ZIP	W-1104 F1 GB1D 1 4444		1.4 CITY-5	ST-ZIP			
TITLE			2.1 TITLE			Change	☐ Addition
NAME	SAVITZ, EDWARD O 22N		2.2 NAME	1			}
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		2.3 STREE	T ADDRESS			
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP			
TITLE	TD	☐ DELETE 3.1 T				Change	☐ Addition
NAME	HIRONS, FRED M		3.2 NAME				
STREET ADDRESS			3.3 STREE	TADDRESS			
CITY-ST-ZIP	TAMPA, FLORIDA 33629			ST-ZIP			F A delition
TITLE		☐ DELETE 4.1 T		1		Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	4.4 CITY-	ST-ZIP		Chan	- Addition
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME				1

CITY-ST-ZIP. 14. I hereby certify that the information supplied with this filing 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 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 attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

☐ Change

Addition

FILED May 15, 1999 8:00 am Secretary of State

05-15-1999 90018 004 ***150.00

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