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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # 312246 FLORIDA ACREAGE COMPANY

(2)

FILED May 15 1997 8:00am Secretary of State

		

Principal Plac	e of Business	Mailing Address		1 188108 1481 11818 (1816 4887) 91679 814	l Diale Bluic Bluic Biric Bluic Biric (BD)
3935 NW 26 S MIAMI FL 3314		9201 S.W. 102ND ST. Miami Fl 33176-3046 US			
				 Date Incorporated or Qualified 12/28/1966 	3a. Date of Last Report 05/01/1996
	Place of Business	2a. Mailing Address		4. FEI Number	Applied for
21 Suite Ast	# ala	26	· - · · ·	59-1169497	∠ Not Applicable
Suite, Apt. #, etc.		Suite, Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	е	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	<u>-</u>	Trust Fund Contribution	Added to Foos
Zip 24	Country 25	Zip 29	Country 30	8. This corporation has liability for Florida Statutes	intangible tax under s. 199.032, ☐ Yes ☐ No
24	g. Name and Address of Curr		[30]	10. Name and Address of New Re	
NUM	NEZ, ALEJANDRO PA		81 Name		
	7 DOUGLAS ROAD, SUITE 200)	82 Street Addi	ONGE A HEN	NAWDEZ
MIA	MI FL 33145		9.	ross (P.O. Box Number is Not Acceptat 2015	25/
				1AU1 FO	
			84 City		OE Zio Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607 1508, Florida Statu	ites, the above named core	poration submits this statement for the p	Surross of share we have a
Office or r	registered agent, or both, in the Sta im familia with, and accept the obl	ite of Florida. Such change was	authorized by the corporat	ion's board of directors. Thereby acce	pl the appointment as registered
SIGNATURE		HAR			
•	Signature typed or finited name of registere	yen and title it applicable (NO ND DIRECTORS	H Beg steled Agout's greature requirements 18.)IACI
12.	OFFICE NO P	DELETE	117116	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	HERNANDEZ,JORGE A.		1.2 MME		Change T Addition
STREET ADDRESS	1401 SW 1ST STREET		1.3 SIREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	name in the state of the control of the control of the state of the st	14 01Y-ST-7IP		
TITLE		DELETE	21 1/LF		Change Addition
NAME STREET ADDRESS			2.2 GME 2.3 FREET ADDRESS		
CITY-ST-ZIP			2 4 11Y - \$1 - Z(P		
TITLE		DELETE	31 LE		Change Addition
NAME			3.2 ME		
STREET ADDRESS			3.3 EET ADDRESS		
CITY-ST-ZIP		DELFIE	3 4 Y-\$1-7IP		Change Addition
NAME		∟ waa	4 5 15		Change Addition
STREET ADDRESS			4.3 ET ADDRESS		
CITY-ST-ZIP			4.4 \$1- ZIP		
TITLE		☐ DELETE	5 1		Change Addition
NAME			52		
STREET ADDRESS			535 L1 ADDRESS		
CITY-ST-ZIP TITLE		DELETE	54 C / - S1 - ZIP 61 TLE		Change Addition
NAME			6.2 NME		FT cuante FT vanilibit
STREET ADDRESS			6.3 S FET ADDRESS		
CITY-ST-ZIP			6.4 CF - S1 - ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the peniption 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 acurate 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 excute 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.