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

CORPORATION **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 466748 (1)

DADE TOMATO COMPANY.

FILED Feb 12 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						1 168111. Albus mittig finis den i ten sten sten and i ten a		
1341 N.W. 22		1341 N.W. 22 S						
MIAMI FL 33 US	142	MIAMI FL 33142 US				DO NOT WRITE IN THIS	SPACE	
UŞ		US				3. Date Incorporated or Qualified		· · · · · · · · · · · · · · · · · · ·
						12/27/1974		
2. Principal P	lace of Business	2a, Mailing Addr	ess			4. FEI Number	Ar	oplied For
21		26				59-1585295	No	ot Applicable
Suite, Apt.	#, etc	Suito, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional
22		27				6. Certificate of Statos Desired	Fee Re	equired
City & State	Θ	City & State				6. Election Campaign Financing		May Be
23		28				Trust Fund Contribution	Added	
Zιρ	Country	7 _(p)	 	ountry	'	8. This corporation owes or has paid the cu		
24	25	29	30			Personal Property Tax due June 30. 10. Name and Address of New Registered] No
	9, Name and Address of Curre	eur Hegisteren Agent		81	Name	10. Name and Address of New Registered	Agent	
	COCO, DAVID V.			١٠.	TRACTIO			
101 N.W. 52ND TERR.				82	Street Add	ress (P.O. Box Number is Not Acceptable)		
MIAMI FL 33178								
				83				
				84	City	Fi	85 Zip (Code
11 Pursuant	to the provisions of Sections 607 D	502 and 607 1508 Florid	la Statutos, the	show.	anamed core	poration submits this statement for the purpose o	f changing if	s registered
agent. I a SIGNATURE.	m familiar with, and accept the obli- Signature typed or printed name of rigostered a					ired when reinstating) DATE		
12.		ND DIRECTORS	1:	3.		ADDITIONS/CHANGES TO OFFICERS AND		3S IN 12
TITLE	Р	□ D£	LETE 1.5	TITLE			☐ Change	Addition
NAME	LOCOCO, JOSEPH N		1.2	NAME				
STREET ADDRESS	9540 S W 68 STREET		1.3	STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL 33173			CITY-S	T-ZIP			
TITLE		□ DÉ	LETE 2.1	TITLE			Change	☐ Addition
NAME			2.2	NAME				
STREET ADDRESS			2.3	STREET	ADDRESS			
CITY-ST-ZIP				4 CITY-	ST-ZIP			T 1 4 4 miles
TITLE		☐ DE		TITLE			☐ Change	Addition
NAME				NAME				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				CITY-	ST-ZIP			A district
TITLE		☐ DE		TITLE			Change	Addition
NAME				2 NAME				
STREET ADDRESS					ADDRESS			
City-St-ZIP				CITY-S	T-ZIP		0	0.4.4941
TITLE		☐ DE		TITLE			☐ Change	■ Addition
NAME				NAME	ſ			
STREET ADDRESS			5.3	STREET	ADDRESS			

14. Thereby 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 supplier entral 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 13 if chapter 607, or on an attachment with an address.

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS

DELETE

5.4 CITY - ST - ZIP

SIGNATURE:

CITY-ST-ZIP

TITLE

305-3248144