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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 499778

SUN AND SHADE PLANTS, INC.

(9)

FILED
May 01 1997 8:00am
Secretary of State



Principal Place of Business Mailing Address									#(#) #
2009 B.W. 67 MIAMI FL 3315		2009 S.W. 67 AVE. Miami Fl 33155-1835							
			•			3. Date Incorporated or Qualified 03/25/1976	3a. Date 02/09	of Last F 9/1996	Report
2. Principal F	Place of Business	2a. Mailing Address	2e. Mailing Address			4. FEI Number			pplied For
21		26	26			59-1652537	Not Applicable		
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Star	1e	City & State	<u>⊢</u> ₁ ′			6. Election Campaign Financing \$5.00 May Be			
23	28		- I - Z -			Trust Fund Contribution	. 니	Added	to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation has liability for			. 199.032,
24	25 25 Name and Address of Curre	29 Annt Registered Agent	30			Florida Statutes 10. Name and Address of New Re	Yes 🔀		
CAF	BRERA, MAURO J.	III nogratered Agent		81 Na	 me	10, Name and Address of New Ac	Biereien W	Jenr	
	9 S.W. 67 AVE.								
MIAMI FL 33155				82 Street Address (P.O. Box Number is Not Acceptable)			•		
(MICS	MI 1 C 00 150		-	83					
				84 City	,		FL	85 Žip	Code
11. Pursuant office or agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the Statem familiar with, and accept the oblig	02 and 607.1508, Florida State e of Florida Such change was gations of, Section 607.0505, F	utes, the ab authorized lorida Stati	ove-nan by the utes.	ned corpo corporation	oration submits this statement for the pon's board of directors. I hereby accept		hanging i niment as	ts registered registered
SIGNATURE	Signature, typed or printed name of registered a	pent and title if applicable (NC	OTE Registered	Agent sign	ature repuire	d when reinstatuig)	DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI		DIRECTO	RS IN 12
TITLE	D DELETE		1.1 10	1.1 TOLE				Change	Addition
NAME	ALFONSO, REYNALDO		1.2 NAI	1.2 NAME					
STREET ADDRESS	2009 SW 67TH AVE.		1.3 STREET ADDRESS		SS				
CITY-ST-ZIP	MIAMI FL			Y - \$1 - ZIP					
TITLE	D	☐ DELETE	ELETE 2.1 TITLE					Change	Addition
NAME	CABRERA, CANDELARIA O.		2.2 NAI	2.2 NAME 2.3 STREFT ADDRESS					
STREET ADDRESS	335 NW 128TH AVE.		23 \$16						
CITY-ST-ZIP	MIAMI FL		2 4 CHY-ST-ZIP			-			
TITLE	PD	DELETE	3 1 101	3 1 TITLE				_ Change	Addition
NAME	CABRERA, MAURO J.		3 2 NAME						
STREET ADDRESS	335 NW 128TH AVE.		3 3 516	3 3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL			3.4. CHY-ST-ZIP					
TITLE	ENLANTER LOOP O	☐ DELETE	4.1] [[L	Change	Addition
NAME	EDUARTEZ, JOSE C. 1500 NE 13TH PLACE		4. 2 NA						
STREET ADDRESS	ANALA CI			REET ADDRE	SS				
CITY-ST-ZIP	VD	DECESE		Y-ST-ZIP			-···· -	7.06	4.1
TITLE	, ·•	L DELETE	5.1 TH				L.	Change	Addition
NAME	0444 C CW 440 CT		5.2 NA						
STREET ADDRESS	LHALO EI			REET ADDRE	SS				
CITY-ST-ZIP	S	☐ DELETE		Y-SI-ZIP				7 66	Auges.
TITLE	DODDIOUET COEL		6.1 141				L	Change	Addition
NAME	6824 SW 114TH PL. APT E		6.2 NAI						
STREET ADORESS	MIAMI FL			REET ADORE	SS				
CITY-ST-ZIP		ad with this filing does not are		Y · \$1 - ZIP	o stated	in Section 119 07/3)(i). Florida Statuto	ما الإسالية		the.

4. I do 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 trusted by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or opposition of the captures.

SIGNATURE

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3/25/0