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

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PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 JUL 26 AM 11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **522286**

1. Corporation Name
LA MANZANILLERA FOOD PROCESSING, INC.

Principal Place of Business	Mailing Address
13091 PORT SAID ROAD. BAY 6 OPA LOCKA FL 33054	13091 PORT SAID ROAD. BAY 6 OPA LOCKA FL 33054

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: **12/09/1976**

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

4. FEI Number: **59-1708957** ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MENENDEZ, JOSE D. 13091 PORT SAID RAD, BAY 6 OPA LOCKA FL 33054	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 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 registered office or registered agent, or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	MENENDEZ, JOSE D		1.2 NAME	
STREET ADDRESS	7430 W 14TH AVE		1.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH FL		1.4 CITY-ST-ZIP	
TITLE	T	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MENENDEZ, JOSE D.		2.2 NAME	200002953062---1
STREET ADDRESS	7430 W 14TH AVE		2.3 STREET ADDRESS	-08/06/99--01075--019
CITY-ST-ZIP	HIALEAH FL		2.4 CITY-ST-ZIP	****150.00 ****150.00
TITLE	ST	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	MENENDEZ, JOSE, D		3.2 NAME	
STREET ADDRESS	7430 W 14TH AVE		3.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH FL		3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	TS
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (11/98)

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.

SIGNATURE: Menendez 7/9/99 (305) 685-9347
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

July 7, 1999

ANNUAL REPORT FILINGS
Division of Corporations
P.O. BOX 6327
Tallahassee, Fl 32314

To whom it may concern:

Please be advise that at no time I recall receiving the 1999 Profit Corporation Annual report prior to the second notice.

I would also like to emphasize that I have been hospitalized several times since I experienced a heart attack on December 3, 1998. On January 17, 1999, my wife had a massive stroke in which has left her blind and paralyzed. In mid January I went back into the hospital for a heart by-pass. I hope you understand all the medical problems I have been facing.

Please accept my apology for not responding sooner.

Enclosed is a check for $150.00 for the 1999 Profit Corporation Annual report. If you wish for me to get in writing a Doctor's letter confirming the above please let me know.

Thanking g you in advance, I remain.

Sincerely,

LA MANZANILLERA FRUIT PROCESSING

Jose D. Menendez
President