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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 21 AM 10:27

DOCUMENT # 583142 (5)

1. Corporation Name
FLORIDA RICE MILL INC.

Principal Place of Business Mailing Address
% RAUL JAVIER SNACHEZ, ESQUIRE
1980 SUNBANK INTL. CENTER, 1 S.E. 3RD AVE.
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/23/1978
3a. Date of Last Report 02/03/1994

2. Principal Place of Business 2a. Mailing Address
1401 Ponce de Leon Blvd. 1401 Ponce de Leon Blvd.

Suite, Apt. #, etc. #202 Suite, Apt. #, etc. #202

City & State Coral Gables, FL City & State Coral Gables, FL

Zip 33134 Country Dade Zip 33134 Country Dade

4. FEI Number 59-1861090
Applied For Not Applicable

5. Certificate 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

AMKGS REGISTERED AGENTS INC.
1980 SUNBANK INTERNATIONAL CENTER
ONE SOUTHEAST THIRD AVENUE
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name Pardillo, Armando A., Esq.
82 Street Address (P.O. Box Number is Not Acceptable) 1401 Ponce de Leon Blvd. #202
83
84 City Coral Gables, FL 85 Zip Code 33134

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, Sections 607.0502, Florida Statutes.

SIGNATURE X

Signature, typed or printed name of registered agent and date if applicable

(Armando A. Pardillo)

(NOTE: Registered Agent signature required when reinstating)

5/5/95

DATE

12. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	CORRALES, EDUARDO VARGAS
STREET ADDRESS	APDO. POSTAL 415-4050
CITY - ST - ZIP	ALAJUELA, COSTA RICA
TITLE	AS
NAME	SANCHEZ, RAUL JAVIER
STREET ADDRESS	1980 SUNBANK INTL CENTER, 1 S.E. 3RD AVE.
CITY - ST - ZIP	MIAMI FL 33131
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	AS
2.3 STREET ADDRESS	PARDILLO, ARMANDO A.
2.4 CITY - ST - ZIP	1401 PONCE DE LEON BLVD, SUITE 202 CORAL GABLES, FL 33134
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 118.07(3)(k), 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.

SIGNATURE: X Eduardo Vargas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/5/95 305-444-0100
Date (Type in three)