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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # 660478

1. Corporation Name
CONTINENTAL PRODUCE, INC.

Principal Place of Business
1200 NW 22ND STREET
UNITS 105-116
MIAMI FL 33142

Mailing Address
1200 NW 22ND STREET
UNITS HOUSE #116
MIAMI FL 33142
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified
03/17/1980

4. FEI Number
59-1983602

Applied For
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired \$8.75 Additional Fee Required

22 City & State

27 City & State

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

23 Zip Country

28 Zip Country

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

24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Perez, Osvaldo
1200 N.W. 22ND STREET
STORE 105-116
MIAMI FL 33142

81 Name PEREZ, OSVALDO, JR.
82 Street Address (P.O. Box Number is Not Acceptable) 1200 N.W. 22ND ST.
83 STORE 105-116
84 City MIAMI FL 85 Zip Code 33142

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 *Osvaldo Perez, Jr.* OSVALDO PEREZ, JR. PRESIDENT 1/27/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD DELETE
NAME PEREZ, OSVALDO
STREET ADDRESS 1200 N.W. 22ND ST.
CITY-ST-ZIP MIAMI FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VD DELETE
NAME PEREZ, OSVALDO, JR
STREET ADDRESS 1200 NW 22ND STREET
CITY-ST-ZIP MIAMI FL

2.1 TITLE Change Addition
2.2 NAME PD
2.3 STREET ADDRESS PEREZ, OSVALDO, JR.
2.4 CITY-ST-ZIP 1200 N.W. 22ND STREET
MIAMI, FL.

TITLE VP DELETE
NAME DIAZ, ROMAN
STREET ADDRESS 1200 NW 22ND ST
CITY-ST-ZIP MIAMI FL 33142

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME VP
4.3 STREET ADDRESS DIAZ, LOURDES
4.4 CITY-ST-ZIP 1200 NW 22ND ST.
MIAMI, FL.

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME S
5.3 STREET ADDRESS PEREZ, CARIDAD AIMEE
5.4 CITY-ST-ZIP 1200 NW 22ND ST.
MIAMI, FL.

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME T
6.3 STREET ADDRESS PEREZ, JULIA
6.4 CITY-ST-ZIP 1200 NW 22ND ST.
MIAMI, FL.

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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: *Osvaldo Perez, Jr.* OSVALDO PEREZ, JR. PRESIDENT 1/27/99 305 324-590
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0210594
CR2E034 (1/1/98)