

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Mar 23, 1999 8:00 am
Secretary of State

03-23-1999 90055 010 ***150.00

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

3. Date Incorporated or Qualified

03/17/1980

4. FEI Number

59-1983602

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 owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

City & State

Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

City & State

Zip

Country

9. Name and Address of Current Registered Agent

PEREZ, OSVALDO
1200 N.W. 22ND STREET
STORE 105-116
MIAMI FL 33142

10. Name and Address of New Registered Agent

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

TITLE PD ☒ DELETE

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

TITLE VD ☐ DELETE

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

TITLE VP ☐ DELETE

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

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

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 PD ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

PEREZ, OSVALDO, JR.
1200 N.W. 22ND STREET
MIAMI, FL.

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE VP ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

DIAZ, LOURDES
1200 NW 22ND ST.
MIAMI, FL.

5.1 TITLE S ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

PEREZ, CARIDAD AIMEE
1200 NW 22ND ST.
MIAMI, FL.

6.1 TITLE T ☐ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

PEREZ, JULIA
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.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/27/99 305 324-590

CR2E034 (11/98)

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