## 2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE:

## May 03, 2004 8:00 am Secretary of State **DOCUMENT # 790788** 1. Entity Name 05-03-2004 90393 001 \*\*\*\*61.25 THE FLORIDA MANGO FORUM, INC. Principal Place of Business Mailing Address 18710 S.W. 288 ST 18710 S.W. 288 ST 94077800 HOMESTEAD FL 33030 HOMESTEAD FL 33030 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 59-2371820 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **DUREIKO, MARTIN** Street Address (P.O. Box Number is Not Acceptable) 22361 S.W. 232 ST. **MIAMI FL 33170** City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Delete ☐ Addition GUZMAN, JUAN NAME NAME 18095 SW 134 COURT STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete Addition TITLE GRIFFIN, COLLEEN 14600 SW 200 ST. STREET ADDRESS STREET ADDRESS MIAMI FL 33177 CITY-ST-ZIP CITY-ST-ZIP THRE ☐ Delete TITLE Change ☐ Addition KING, LOUISE NAME NAME 21910'SW 250 ST -----STREET ADDRESS STREET ADDRESS HOMESTEAD FL 33031 CITY - ST- ZIP CITY-ST-ZIP SD ☐ Delete Change Addition TITLE TITLE ELLENBY, MARC NAME 25250 SW 194 AVE STREET ADDRESS STREET ADDRESS HOMESTEAD FL 33031 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition DUREIKO, MARTIN NAME NAME 22361 S.W. 232 ST. STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 in changed, or on an attachment with an address, with athother like empowered.

**FILED**