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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000004580

1. Corporation Name

GRANJA COYOLITO SOCIEDAD ANONIMA

Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Zip Country Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required St.00 May Be Added to Fees Required Fee Re
20 S. BISCAYNE BLVD. SUITE 4990 MIAMI FL 33131 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/20/1995 2. Principal Place of Business 2a. Mailing Address 25
SUITE 4950 MIAMI FL 33131 SUITE 4950 MIAMI FL 33131 Applied For Oy/20/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 52-1696551 Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State 2a City & State 2b Country Zip Country Zip Country Zip Country Zip Country Zip Country Applied to Fore Required Personal Property Tax. CHOPP, HAROLD ESO. #4950, 200 S. BISCAYNE BLVD. MIAMI FL 33131 Agent Lam familiar with, and accept the obligations of, Section 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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. In familiar with, and accept the obligations of, Section 607.0502 from a country agent Lam familiar with, and accept the obligations of, Section 607.0505. 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 607.0502. 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 607.0502. Florida Statutes 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 agent. I am familiar with and accept the obligations of, Section 607.0502. Florida Statutes, the above-nam
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City & State Country Zip Country Registered Agent Street Address of Current Registered Agent CHOPP, HAROLD ESQ. #4950, 200 S. BISCAYNE BLVD. MIAMI FL 33131 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 original segent, 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 agent and wife if applicable CITY STITLE PD CHAVARRIA, ROLANDO ALFARO STREET ADDRESS #4950, 200 S. BISCAYNE BLVD. MIAMI FL 33131 DELETE 11. TITLE SD DAVILA, ANGELA C Country R. This corporation owes the current year Intanging in Added to Fees Trust Fund Contribution Radded to Fees Trust Fund Contribution Radded to Fees This personal Property Tax. Street Address of New Registered Agent 10. Name and Address of New Registered Agent 11. Name Registered Address of New Registered Agent Registered Address of New Registered Agent Registered Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Registered Agent is street address of New Registered Agent Registered Address of New Registered Agent Reg
Zip Country Zip Country Added to Fees Zip Country Zip Country B. This corporation owes the current year Intangible Personal Property Tax. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CHOPP, HAROLD ESO. #4950, 200 S. BISCAYNE BLVD. MIAMI FL 33131 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 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 obligation 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent in all materials. In a familiar with, and accept the obligation of 07.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent in a familiar with, and accept the obligation of 07.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent in a familiar with, and accept the obligation of 07.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent in a familiar with an accept the obligation of 07.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent in a familiar with
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CHOPP, HAROLD ESQ. #4950, 200 S. BISCAYNE BLVD. MIAMI FL 33131 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 registerer 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 SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD ONAME CHAVARRIA, ROLANDO ALFARO STREET ADDRESS #4950, 200 S. BISCAYNE BLVD. 13. STREET ADDRESS #4950, 200 S. BISCAYNE BLVD. 14. CITY- ST-ZIP MIAMI FL 33131 14. CITY- ST-ZIP MAMME DAVILA, ANGELA C 81 IIILE DAVILA, ANGELA C
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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.