

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # **F98000002052**

1. Corporation Name

FRESHWORLD FARMS, INC.

Principal Place of Business
**6701 SAN PABLO AVE.
OAKLAND CA 94608**

Mailing Address
**6701 SAN PABLO AVE.
OAKLAND CA 94608**

FILED
Aug 17, 1999 8:00 am
Secretary of State

08-17-1999 90007 009 ***550.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/02/1998

4. FEI Number

22-2974312

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.



Yes ☐ No

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

10. Name and Address of New Registered Agent

81 Name

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 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

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 **C** ☐ DELETE

NAME **JIMENEZ, BERNARDO**
STREET ADDRESS **RIO CAURA 358 OTE. (ALTOS), CO. DEL VALLE**
CITY-ST-ZIP **66220 GARZA GARCIA, MEXICO**

TITLE **DT** ☐ DELETE

NAME **FINNEL, ARTHUR H**
STREET ADDRESS **RIO CAURA 358 OTE. (ALTOS), CO. DEL VALLE**
CITY-ST-ZIP **66220 GARZA GARCIA, MEXICO**

TITLE **DP** ☒ DELETE

NAME **SANCHEZ, ABELARDO**
STREET ADDRESS **9255 CUSTOMHOUSE PLAZA, STE. 1**
CITY-ST-ZIP **SAN DIEGO CA 92173**

TITLE **V** ☒ DELETE

NAME **WILEY, BRET**
STREET ADDRESS **10915 BONITA BEACH RD., SE, UNIT 1131**
CITY-ST-ZIP **BONITA SPRINGS FL 33923**

TITLE **S** ☐ DELETE

NAME **NEAGLEY, CLINTON H**
STREET ADDRESS **6701 SAN PABLO AVE.**
CITY-ST-ZIP **OAKLAND CA 94608**

TITLE **AS** ☐ DELETE

NAME **RUDBERG, JOE A**
STREET ADDRESS **1700 PACIFIC AVE., STE. 3300**
CITY-ST-ZIP **DALLAS TX 75201-4693**

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

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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 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.

SIGNATURE:

Signature of Katherine Harris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/20/99

Date

610-876-8340

Daytime Phone #

CR2E034 (5/99)

0121057