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FILED

Jan 24 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # G54059 (2)

1. Corporation Name

DANSK AGRI SERVICES INCORPORATED

Principal Place of Business

6555 NW 36 STREET  
SUITE 103  
MIAMI FL 33166  
US

Mailing Address

P.O. BOX 660824  
MIAMI FL 33266-0824



3. Date Incorporated or Qualified

08/11/1983

3a. Date of Last Report

05/28/1996

2. Principal Place of Business

21 6405 NW 36 STREET

2a. Mailing Address

26 6405 NW 36 STREET

Suite, Apt. #, etc.

22 119

Suite, Apt. #, etc.

27 119

City & State

23 MIAMI FLORIDA

City & State

28 MIAMI FLORIDA

Zip

24 33166

Country

25 UGA

Zip

29 33166

Country

30 US

4. FEI Number

39-1445322

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 has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

RIVERA, JORGE L.  
6555 NW 36 STREET, SUITE 103  
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name

RIVERA JORGE L

82 Street Address (P.O. Box Number is Not Acceptable)

6405 NW 36 STREET

83

SUITE 119

84 City

MIAMI

FL

85 Zip Code

33166

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 of registered agent or registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

01-15-97

12. OFFICERS AND DIRECTORS

TITLE PVD  
NAME RIVERA, JORGE  
STREET ADDRESS 6555 NW 36 STREET, STE 103  
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
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CITY-ST-ZIP

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CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PVD  
1.2 NAME RIVERA JORGE  
1.3 STREET ADDRESS 6405 NW 36 STREET, STE 119  
1.4 CITY-ST-ZIP MIAMI FL 33166

☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

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

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/15/96

Date

(205) 871-4116

Daytime Phone #

CR2E034 (9/96)