

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 MAR 14 AM 8:04

DOCUMENT # G57137 (3)

1. Corporation Name
ENRIQUE PRODUCE, INCORPORATED

Principal Place of Business Mailing Address
**1378 NW 22ND STREET
PO BOX 514
MIAMI FL 33142** **1378 NW 22ND STREET
PO BOX 514
MIAMI FL 33142**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report
08/24/1983 **02/18/1994**

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 28 Country 29 Zip 30 Country

4. FEI Number Applied For
59-2336720 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing \$5.00 May Be Added to Fees
Trust Fund Contribution

8. This corporation has liability for intangible tax under S. 109.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GONZALEZ, ENRIQUE
1495 NW 23RD STREET
MIAMI FL**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City 85 Zip Code
FL

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: _____ DATE: _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: PD
NAME: GONZALEZ, ENRIQUE
STREET ADDRESS: 1628 SW 24 AVE 2431 SW 16TH AVE
CITY-ST-ZIP: MIAMI FL 33141

1. TITLE Change Addition
2. NAME
3. STREET ADDRESS
4. CITY-ST-ZIP

TITLE: VP
NAME: GONZALEZ, MERCEDES *MERCEDIS, MERCEDES*
STREET ADDRESS: 1628 SW 24 AVENUE
CITY-ST-ZIP: MIAMI FL

5. TITLE Change Addition
6. NAME
7. STREET ADDRESS
8. CITY-ST-ZIP

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

9. TITLE Change Addition
10. NAME
11. STREET ADDRESS
12. CITY-ST-ZIP

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

13. TITLE Change Addition
14. NAME
15. STREET ADDRESS
16. CITY-ST-ZIP

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

17. TITLE Change Addition
18. NAME
19. STREET ADDRESS
20. CITY-ST-ZIP

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

21. TITLE Change Addition
22. NAME
23. STREET ADDRESS
24. CITY-ST-ZIP

14. I, the undersigned, certify that the information required with this form is voluntarily furnished and does not qualify for the exemption stated in Sections 119.07(3)(b), Florida Statutes. I further certify that the information appearing 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. 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 of report, or on an attachment, as an address.

SIGNATURE: *Mercedes Garcia, VP* 3-11-95
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR Date (Include Title if)