FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G62677

(1)

	BEAN TERMINALS, INC.	Mailton Address							
Principal Place of Business Mailing Address						\$			
C/O JORDAN MONOCANDILOS C/O JORDAN MONOCANDI 3201 NW 24TH ST RD 3201 NW 24TH ST RD MIAM! FL 33142 MIAM! FL 33142			NDILOS	ilos		DO NOT WRITE IN THIS	SPACE	·	
						3. Date Incorporated or Qualified			
2 Principal F	Place of Business	2a. Mailing Address				09/19/1983 4. FEI Number	— т	Applie	d For
21	26							+	plicable
Suite, Apt.	Suite, Apt. #, etc. Suile, Apt. #, etc.					¢0.75		75 Addit	
27						5. Certificate of Status Desired	Fe	e Requir	ed
City & Stat	ity & State City & State					6. Election Campaign Financing	\$5	.00 May	/ Be
23	28					Trust Fund Contribution		ded to Fe	
Zip	Country	Zip		untry		8. This corporation owes or has paid the c	urrent yea	_ ~	
24	25 25 Name and Address of Curren	29	30	-		Personal Property Tax due June 30. 10. Name and Address of New Registered		No	
	ONOCANDILOS, JORDAN	Triegistered Agent		81	Name	10. Hante alto Addition of How Hegisters	ragoni		
3201 NW 24TH ST RD									
MIAMI FL 33142				82	Street A	ddress (P.O. Box Number is Not Acceptable)			
1817	AIII 1 6 00 142		i	83					$\neg \dashv$
				84	010			Tim Cond	
ļ					City	F	_	Zip Code	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statu	les, the a	bove	named c	corporation submits this statement for the purpose oration's board of directors. I hereby accept the ap	of changi	ng its re	gistered
agent. La	registered agent, or both, in the state am familiar with, and accept the obliga	tions of, Section 607.0505, F	lorida Stat	tutes.	the corpo	oration's board of directors. Thereby accept the ap	pomme	n as teði	STRIBO
SIGNATURE									
	Signature typed or printed name of registered up a			d Agen	it signature ro	equired when reinstating) DATE	ID DIDCO	TODO	
12.	OFFICERS AND	DELETE	13. 1.1 TI	T. E		ADDITIONS/CHANGES TO OFFICERS AN	Cha		Addition
NAME	•	**************************************		AME	}			.,9-	1.00
STREET ADDRESS	3201 NW 24TH ST RD		1		ADDRESS				
CITY-ST-ZIP	MIAMI FL			ITY-ST					
TITLE	VP DELETE			2.1 TiTLE			Cha	nge 🗀	Addition
NAME	MONOCANDILOS, THEODORA	4	2.2 N	AME					
STREET ADDRESS	3201 NW 24TH ST RD		2.3 \$1	TREET A	ADDRESS				
CITY-ST-ZIP	MIAMI. FL 00000		240	CITY-ST	T-ZIP				
TITLE			3.1 Ti	3.1 TITLE			Cha	nge 🗀	Addition
NAME	DIAZ, LILIA A		3.2 N/	AME					ŧ
STREET ADDRESS	3201 NW 24TH ST RD		3.3 S	TREET A	ADDRESS				
CITY-ST-ZIP	MIAMI, FL 00000			CITY-ST	- ZIP				
TITLE	T DELETE 411			1		L. Cha	nge L	Addition	
NAME	ISERN, JORGE E		4. 2 N						1
STREET ADDRESS	3201 NW 24TH ST RD				ADDRESS				
CITY-ST-ZIP TITLE	MIAMI, FL 00000	DELETE 5.11		ITY - ST-	- ZIP		Cha	nge 🗆	Addition
NAME			5.2 N		ľ		UI40	9o ∟	,
STREET ADDRESS	3201 NW 24TH ST RD				ADDRESS				1
CITY-ST-ZIP	MIAMI FL		1	ITY-ST	1				İ
TITLE	and and a pa	DELETE	6.1 TI		-11		☐ Cha	nge [Addition
NAME		-	6.2 N				•		
STREET ADORESS			1		ADORESS)
CITY-ST-ZIP	!			ITY-ST					

14. Thereby certify that the information supplied with this filling 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 eath; that I am an officer or director of the corporation of 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 changing on an attachment with an address.

MANATURE.

Jorge E. Isern

APR 2 2 1998 305-637-8963

FILED

May 15 1998 8:00am

Secretary of State