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

PROFIT "MINIO CORPORATION ANNUAL REPOR 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H09491

Principal Place of Busin	1055 ្
% FRED H. PETERSON 3375 66TH AVE	
VERO BEACH FL 32966	i i

FILED Jan 22, 1999 8:00am Secretary of State 01-22-1999 90046 043 ***150.00

1. Corporation						
PETERS	ON'S GROVES & NURSERY	, INC.				
				A CORECTA ANA ROLLO DELLA ESCA AGRAZA ARRA DICE		
Principal Plac	e of Business	Mailing Address		3 1005011 9011 00110 19115 01016 1001	t Milita militin grætt minet minte inne	
% FRED H. PE	2022/048V	% FRED H. PETERSON				
3375 66TH AVE 3375 66TH AVE						
VERO BEACH FL 32966 VERO BEACH FL 32966				DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualifed]
				06/25/1984		
2. Principal F	Place of Business'	2a. Mailing Address		4. FEI Number	Applied For	1
21		26		59-2434753	Not Applicable]
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional] .
22		27		5. Certificate of Status Desired	Fee Required	
City & Star	te	City & State	· *********	6. Election Campaign Financing	\$5.00 May Be	1.
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year I	ntangible	1
24	25	29 30	o	Personal Property Tax.	X Yes □No	
•	9, Name and Address of Current	Registered Agent		10. Name and Address of New Registere	d Agent]
	And the second second		81 Name			
	ERSON, FRED H.	- A - C	82 Street Add	Iress (P.O. Box Number is Not Acceptable)		1
	5 66TH AVE	¥°∌	62 Sileet Aud	iress (F.O. box Number is Not Acceptable)		Ì
VER	O BEACH FL 32966		83		1.0	1
						_
	, C. P.		84 City	F	85 Zip Code	
11 Pursuant	to the provisions of Sections 607 0502	and 607 1508. Florida Statutes	the above-named corr			1
office or i	egistered agent, or both, in the State of	f Florida. Such change was auth	orized by the corporati	poration submits this statement for the purpose con's board of directors. I hereby accept the app	ointment as registered	
agent. I a	im familiar with, and accept the obligation	ons of, Section 607.0505, Florida	a Statutes.	•		
SIGNATURE	Stgnature, typed or printed name of registered agent	and title # applicable /NOT5: Pe	gistered Agent signature require	ed when reinstating) DATE		_ ا
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12	ا ق
TITLE	DP	□ DELETE	1,1 TITLE	ADDITIONATION OF THE OF	☐ Change ☐ Addition	⊣ <i>-</i> =
NAME	PETERSON, FRED H.		1.2 NAME	•	_ , _	7
	3375 66TH AVE		1.3 STREET ADORESS			8
STREET ADDRESS	VERO BEACH FL		1			6
CITY-ST-ZIP	D :	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE			ქ ლ
TITLE	PETERSON, EDWARD P.	- Delicie	22 NAME		Change Addition	-
, NAME .	3375 66TH AVE				☐ Change ☐ Addition	1
STREET ADDRESS			- 1		☐ Change ☐ Addition	
-CITY-ST-ZIP	VERO_BEACH_FL		2.3 STREET ADDRESS		☐ Change ☐ Addition	
TITLE		Deter	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP			
NAME	THEN HOUSE	☐ DELÉTE	2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition ☐ Change ☐ Addition	
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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 an attachment with an addless, with all other like empowered.

SIGNATURE