CORI ANNU	NOW: FILING FEE PORATION AL REPORT 1996	FLORIDA DEP Sandra Secre	ARTMENT OF STATE  B Mortham  tary of State  CORPORATIONS			
DOCUN 1. Corporation	MENT # <b>J2700</b>	07 (0)				
GRIME	ES FRUIT CO., INC.			I IBBINIS ĒKU SISM AURIK BRIM BR	Aldi INGL BLACK BLACK BLACK	d Giáin Sillei Biall (Co)
Principa! Place o	of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·			
205 GOOD ( ORLANDO F US		205 GOOD HOMES ORLANDO FL 32835 US				
				3. Date incorporated or Qualified 08/01/1986	3a. Date of Las 02/20	t Report / <b>1995</b>
2. Principal Plac 21 【しつ】	MYRTLE AV.	2a. Mailing Address 26 1621 Mye	TIE AV.	4. FEI Number 59-2710971	-	Applied For Not Applicable
Suite, Apt. #,		Suite Apt. #, etc	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5. Certificate of Status Desired		75 Additional
City & State	ING, FL	City & State  28 SEBRING	, FL	Election Campaign Financing     Trust Fund Contribution	□ <b>\$</b> 5	.00 May Be
Zip 24 3381	Country  7   25   HIGHLAND  9. Name and Address of Current	Ζφ 29 33811	Country 30 HIGHLAND	8. This corporation has liability for Florida Statutes		
	2 BEACH FL 32960		83 84 City			Zip Gode
VERO B  11. Pursuant to or registered familiar with SIGNATURE	2 SEACH FL 32960 the provisions of Sections 602 0502	ia. Such change was authoriz on 607.0505, Florida Statutes	84 City es, the above named corporation's board	ration submits this statement for the pur ird of directors. Thereby accept the appo	FL prose of changing dointment as register	s registered office ed agent i fam
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SIGNATURE:

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, Flonda Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

IGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR.

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