## 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 #

(6)

BANANA SUPPLY CO., INC.

**FILED** May 01 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						idia didiri didiri	E(E)  <del> </del>			
W TAX DEPA		% TAX DEPARTMENT	250 EAST FIFTH ST., 27TH FLOOR							
250 EAST FII CINCINNATI (	FTH ST., 27TH FLOOR	250 EAST FIFTH ST., 27T CINCINNATI OH 45202				DO NOT WRITE IN THIS SPACE				
CHAMILANT OF TREE						3. Date Incorporated or Qualified	O OI AOL	···		
						06/16/1987				
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Applied For		
21 26						31-1211432		Not Applicable		
Sulte, Apt.	#, etc.:	Suite, Apt. #, etc.				5. Certificate of Status Desired		5 Additional Required		
						Etastian Compaign Financing		<del>`</del>		
23	28				6. Election Campaign Financing Trust Fund Contribution		00 May Be ad to Fees			
Zip	Country	7 <sub>IP</sub>	Cour			8. This corporation owes or has paid the current year Intangible				
24	25	29 30			Personal Property Tax due June 30. 🔀 Yes 🔲 No					
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent  1 Name				
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD				01	Name					
PLANTATION FL 33324				82	Street Addr	ddress (P.O. Box Number is Not Acceptable)				
, ,	MITATION I E 00024			83	· ····		<del></del>			
		4		24	0"			- 0-1-		
				84	City	F	L 85 Z	ip Code		
11. Pursuant	to the provisions of Sections 607.05	502 and 607,1508, Florida Statute	es, the al	ove-	named corp	poration submits this statement for the purpose	of changin	g 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, typed or profed name of registered agent and title of applicable. (NOTE Registered Agent signature required when reinstating)  DATE										
			13.	Agen	signature require	ADDITIONS/CHANGES TO OFFICERS A		ORS IN 12		
TITLE			1.1 111	1.1 TITLE			Chang	e Addition		
NAME	JORDAN, WILLIAM R.		1.2 NAME		ļ			į.		
STREET ADDRESS	\$030 NE 2ND AVE		1.3 STREET ADDRESS		DORESS			<b>]</b> ,		
CITY-ST-ZIP				Y-\$1-	ZIP PD		Chang	e X Addition		
TITLE NAME	THOMAS D. MIST			e.i mer.		lliater, Jeff E.	Chang	e LA Addition		
STREET ADDRESS	<b>\$0</b> 30 NE 2ND AVE					30 NE 2nd Ave.				
CITY-ST-ZIP	MAMI FL		2. 4 CITY-ST-		3	ami FL				
TITLE	VD X DELETE 3.1		3.1 Til		VI		☐ Chang	e X Addition		
NAME	SCHINTZIUS, DAVID M.		3.2 NAME			rquero, Gustavo Fonseca				
STREET ADDRESS	\$030 NE 2ND AVE MIAMI FL		3.3 STREET A		Ma	30 NE 2nd Ave.				
CITY-\$T-ZIP	0.7.			IY-ST-	-ZIP MIL	ami FL	L Chano	e Addition		
TITLE NAME	LIGAN, WARREN J.	□ vecci€	4.1 TIT				L. Chang	E MOUIIDH		
STREET ADDRESS	250 EAST FIFTH STREET, 2	7TH FLOOR	1		DDRESS			ì		
CITY-ST-ZIP	OMCANNATI OLI			Y-ST-	Ī					
TITLE	☐ DELETE 5.1 TI					Chang	e Addition			
NAME		5.		ME						
STREET ADDRESS			5.3 STR		1					
CITY-ST-ZIP		DELETE	5.4 CITY -		ZIP		Chang	e Addition		
TITLE NAME			6.1 TIT 6.2 NA		-		LI CHANG	io La vocition		
STREET ADDRESS					DDRESS :					
CITY-ST-ZIP			•	Y-SI-	1					
14. hereby	certify that the information supplied	with this filing does not qualify fo	r the exe	mptic	on stated in S	Section 119.07(3)(i), Florida Statutes. I further	certify that i	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 empewered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an absolute with an address.