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 **FILED**

Apr 23 1998 8:00am

Secretary of State

DOCUMENT #

L44587

(8)

LANTANA MANGO AND ORANG	BE FARM INC.				
Principal Place of Business	Mailing Address	_,-		{	.BIT BIBN BIBN BIBN BIBN (BBI
6300 HIGH RIDGE RD LAKE WORTH FL 33462 6300 HIGH RIDGE RD LAKE WORTH FL 33462					
			DO NOT INDITE IN THE	10 0D 4 0E	
				DO NOT WRITE IN THI 3. Date Incorporated or Qualified	3 SPACE
				01/17/1990	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
26				65-0246055	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
27				5. Certificate of Status Desired	Fee Required
City & State	·	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28	County		Trust Fund Contribution	Added to Fees
~~ , `	Country Zip Country		1	8. This corporation owes or has paid the o	current year Intangible X Yes No
24 25 25 Name and Address of Cu		30		Personal Property Tax due June 30. 10. Name and Address of New Registere	
TSIOTIS, PAUL		81	Name		
1951 N. POWERLINE ROAD		ļ <u>.</u>	Charles A ala	-/50 8- 11-1-1-1-1	
POMPANO BEACH FL		82	Street Addr	Address (P.O. Box Number is Not Acceptable)	
TOMA AND DEAGN TE		83			
		100	031		T-1 - 0 - 1
		84	City	F	L 85 Zip Code
Pursuant to the provisions of Sections 607 office or registered agent, or both, in the Sagent I am familiar with, and accept the o SIGNATURE Signature, typed or printed name of registere.	bligations of, Section 607.0505, Flo	orida Statute:	S	ion's board of directors. I hereby accept the a	
	AND DIRECTORS	13.	14.8	ADDITIONS/CHANGES TO OFFICERS A	
TITLE D	DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME TSIOTIS, PAUL		1.2 NAME			
STREET ADDRESS 1951 N. POWERLINE ROA	Φ	1.3 STREET	ADDRESS		
CITY-ST-ZIP POMPANO BEACH FL		1.4 CITY~S	T-ZIP		
TITLE	☐ DELETE	2.1 TITLE			Change Addition
NAME		2.2 NAME			
STREET ADDRESS		2.3 STREET	ADDRESS		
CITY-ST-ZIP	DELETE	2. 4 CITY - 5	ST - ZIP		Disease Eligates
TITLE	Dettere.	3.1 TITLE			Change Addition
NAME OTREET ADDRESSO		3.2 NAME	4000000		
STREET ADDRESS		3.3 STREET			
CITY-ST-ZIP TITLE	DELETE	3.4. CITY-5 4.1 TITLE	51 · 41r		Change Addition
NAME		4. 2 NAME			الروايد و المسط = 9: := بسمب
STREET ADDRESS		4.3 STREET	ADDRESS		
CITY-ST-ZIP		4.4 CITY - S	1		
TITLE	DELETE	5.1 TITLE			Change Addition
NAME		5.2 NAME	l		
STREET ADDRESS		5 3 STREET	address		
CITY-ST-ZIP	·····	5.4 CITY - S	T - ZIP		
TITLE	DELETE	6.1 TITLE			Change Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET	ADDRESS		
CITY-ST-ZIP		6.4 CITY-S		0.45.440.07/04/1.50	
 I hereby certify that the information soppilis indicated on this annual report or supplom officer or director of the corporation of the Block 12 or Block 13 if changes, or on an 	to with this tiling does not qualify to ental annual report is true and act receiver or vustee empowered to e attachment with an address.	ir the exemp urate and the execute this	tion stated in at my signatur report as requ	Section 119.07(3)(i), Florida Statutes. I further re shall have the same legal effect as if made uired by Chapter 607, Florida Statutes; and that	cernity that the information under oath; that I am an it my name appears in