

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**


FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Jul 07, 1999 8:00 am**  
**Secretary of State**

07-07-1999 90013 012 \*\*\*150.00

**DOCUMENT # L93029**

1. Corporation Name

**GREENLEAF CORPORATION**

Principal Place of Business

Mailing Address

1310 NW 19 STREET  
HOMESTEAD FL 33030  
US

1310 NW 19 ST  
HOMESTEAD FL 33030  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/23/1990

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0214067

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property.☐

Yes

☐

No

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GUADAYOL, EDUARDO**  
1310 NW 19 STREET  
HOMESTEAD FL 33030

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing 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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2. OFFICERS AND DIRECTORS

TITLE

PTD

☐ DELETE

NAME

**GUADAYOL, EDUARDO**

STREET ADDRESS

**15351 S.W. 302ND STREET**

CITY-ST-ZIP

**LEISURE CITY FL**

DELETE

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