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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # M19468

FUNDORA PRODUCE CORPORATION

FILED Feb 02, 1999 8:00am **Secretary of State**

02-02-1999 90007 038 ***150.00



Principal Place of Business	Mailing Address			E IDD[BOK INI {	OLOUC OLOUR BÉOLL DIBIL I	4 -4 6 4
C/O PEDRO FUNDORA	C/O PEDRO FUNDORA					-
520 S. W. 13TH AVE.	1 AVE. 520 S. W. 13TH AVE.					
MIAMI FL 33135-3949	MIAMI FL 33135-3949			DO NOT WRITE IN	THIS SPACE	· · ·
US .	US			3. Date Incorporated or Qualifed	. ,	
				08/15/1985 4. FEI Number		
2. Principal Place of Business	2a. Mailing Address				<u> </u>	plied For t Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			59-2570502	\$8.75	
	27 Suite, Apr. #, etc.			5. Certifcate of Status Desired	Fee Re	
City & State	City & State			6. Election Campaign Financing	\$5.00	
23	28			Trust Fund Contribution	Added t	
Zip Country	Zip	Coun	try	8. This corporation owes the current year	ar Intangible	
24 25	29	30		Personal Property Tax.		□No
9. Name and Address of Current				10. Name and Address of New Registe	red Agent	
	; f	1	81 Name	*	ŧ	
FUNDORA, PEDRO	\$	-	B2 Street Add	Iress (P.O. Box Number is Not Acceptable)		
520 SW 13 AVE	* f		S. S		ا مانفاه بالمحاجديوجي	
MIAMI FL 33135			B3	· (1)		图 图 海
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San					B⊫B I I I	1
11: Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of	and 607.1508, Florida Statu	tes, the about	ove-named corp	poration submits this statement for the purpos	se of changing its	registered
				ion a board of directors, i hereby accept the t	ippointmont do re	
⇒ agent∴l ám familiar with, and accept the obligati	ions of, Section 607.0505, Fig	orida Statul	es.			·
95	Fay.		es.			, ,
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CITY-ST-ZIP 14. 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 trastee 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 of an attacher in with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS