FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M37402

1. Corporation Name

FEMAR PLANTS CORP.

Principal Place of Rusiness

Mailing Address

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90170 019 ***150.00



FIIIICIPAI FIACE	of Business	Willing Flactions			
7329 MIAMI LAKES DR MIAMI FL 33014		7329 MIAMI LAKES DR MIAMI FL 33014			DO NOT MOITE IN THIS SPACE
					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed 08/26/1986
2. Principal Place of Business 2a. Mailing Address			· · ·		4. FEI Number Applied For
21		26	<u> </u>		59-2709452 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #,			ic.		_ \$8.75 Additional
22	.,	27			5. Certifcate of Status Desired Fee Required
City & State City & State					6. Election Campaign Financing \$5.00 May Be
3 28		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	,	8. This corporation owes the current year Intangible
24	25	29	30		Personal Property Tax.
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered Agent
			81	Name	
MARTINEZ, FERNANDO			82	Street A	Address (P.O. Box Number is Not Acceptable)
7329 MIAMI LAKES DR			"	000.7	Addition (1.5. Box Addition to the Addition of the Addition (1.5. Box Addition to the Addition of the Addition
MIAN	AI FL 33014		83		
			84	City	85 Zip Code
					FL 13 24 5005
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					
				nt signature re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	PD OFFICERS A	DELETE	13.	Ī	Change Addition
TITLE	, -		l l		
NAME	MARTINEZ, FERNANDO		1.2 NAME		
STREET ADDRESS	7329 MIAMI LAKES DR			TADDRESS	
CITY-ST-ZIP	MIAMI FL 33014	DELETE	1.4 CITY-S	ST-ZIP	☐ Change ☐ Addition
TITLE	D MADEINEZ MATILDE	LJ DECETE	2.1 TITLE		Change Change
NAME	MARTINEZ, MATILDE		2.2 NAME	1	
STREET ADDRESS	7329 MIAMI LAKES DR			T ADDRESS	
CITY-ST-ZIP	MIAMI FL 33014		2.4 CITY-	ST-ZIP	Channe C Addition
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREE	TADDRESS	
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREE	T ADDRESS	
CITY-ST-ZIP			4.4 CITY-S	iT-ZIP	
TITLE		☐ DELETÉ	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP			5.4 CITY-S	T-ZIP	
TITLE		☐ DELETE	6.1 TITLE	7	☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREE	TADORESS	,
CITY-ST-ZIP			6.4 CITY-S	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 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 changed, or or an attachment with an address, with all other like empowered.

SIGNATURE: