## **2003 NOT-FOR-PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## Aug 04, 2003 8:00 am Secretary of State 07-10-2003 90109 038 \*\*\*\*61.25

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1. Entity Nan	TIONAL HARVEST TIME MINK	STRIES, INC.				0. 10 2000		911 <b>2</b> 0	
Principal Place of Business 16611 SOUTHWEST 108TH COURT MIAM! FL 33157		Mailing Address 16611 SOUTHWEST 108TH COURT MIAMI FL 33157		55053130					
Principal Place of Business     3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES					
City & State		City & State		4. FEI Number 02 - 0552472 Applied For Not Applied ble					
Zip	Country Zip		Cou	ntry	5. Certificate of Status Desired			ditional ed	
<del></del>	6. Name and Address of Current	Registered Agent	- : -	Name	7. Name and Add	eas of New Register	ed Agent		
45,545	A APPROPRIATE A STATE OF THE ST		ا۔ حب	Name		<u>a</u>	<u> </u>		
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST.				Street Address (P.O. Box Number is Not Acceptable)					
4TH FLOOR MIAMI FL 33145				City	FL Zip Code				
	a named entity submits this statement for	the purpose of changing its	recistere	d office or register	red egent or both in t			and accept	
	tions of registered agent.	stora P.A	1	l Agent signature required			7- <i>6</i> 6-		
FILE NOW: FEE IS \$61.25  After September 10, 2003, min will be \$236.25  9. Election Campaign Finan Trust Fund Contribution.					\$5.00 May Be Make Check Payable to Florida Department of State				
10.	OFFICERS AND DIF	ECTORS	11.		ADDITIONS/CHANGE	S TO OFFICERS AND	DIRECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VASCIANNA, DENZIL S 16811 SOUTHWEST 108TH COUL MIAMI FL 33157	C Delete					Change	☐ Addition :	
TITLE NAME	VD FARRINGTON, WILEY J	☐ Delete	TITLE	1		£ -	☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP	16611 SOUTHWEST 108TH COU	सा	STREE	T ADDRESS ST-ZIP.	<b></b>	,			
TITLE	SD	☐ Delete	TITLE				Change	Addition	
STREET ADDRESS CITY-ST-ZIP	VASCIANNA, CARLEEN J 18611 SOUTHWEST 108TH COUI MIAMI FL 33157	रा	STREE	T ADORESS ST-ZIP			<del></del>		
TITLE	TO	☐ Delete	MILE		<del></del> -		☐ Change	Addition	
NAME STREET ADORESS	VARGAS, EDIE 16611 SOUTHWEST 108TH COUI	रा		T ADORESS		₹-			
TITLE	MIAMI FL 33157	☐ Delete	CITY-S TITLE		<del></del>		☐ Change	☐ Addition	
NAME STREET ADDRESS			name Street	T ADORESS		ļ.			
CITY-ST-ZIP			CITY-S	ST-ZIP	<u> </u>				
TITLE NAME		☐ Delete	TITLE NAME			,	☐ Change	Addition	
STREET ADORESS			STREET	T ADDRESS				ł	

12. 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, if further certify that the information indicated on this report or supplemental 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 of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attach trent with an address, with all other like empowered.

**SIGNATURE**