

2004 FOR PROFIT CORPORATION ANNUAL REPORT

Amended

04 JUL 2004 90005 027 ****35.00
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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04232004 Chg-P CR2E034 (10/03)

DOCUMENT # P00000082429					
1. Entity Name FRUTOS ENTERPRISES, INC.					
Principal Place of Business 2524 W 70TH PLACE HIALEAH, FL 33016			Mailing Address 2524 W 70TH PLACE HIALEAH, FL 33016		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
4. FEI Number 65-1040261				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FRUTOS, ANDRES F 7864 NW 164TH TERRACE MIAMI, FL			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number Is Not Acceptable) 2524 West 70 Place Hialeah City Hialeah FL Zip Code 33016		
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD FRUTOS, ANDRES S 2524 W 70TH PLACE HIALEAH, FL 33016 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	000039343790 07/20/04--01053--001 **26.25 ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FRUTOS, ANDRES F 7864 NW 164TH TERRACE MIAMI, FL 33015 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	2524 West 70 th Place Hialeah, FL 33016 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FRUTOS, IVONNE 7864 NW 164TH TERRACE MIAMI, FL 33015 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FRUTOS, NANCY 2524 W 70TH PLACE HIALEAH, FL 33016 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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. I 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

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