2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 16, 2004 8:00 am Secretary of State

	DOCUMENT # P03000098624 1. Entity Name ALVAREZ CITRUS, INC					03-16-2004 90020 001 ***150.00				
Principal Place of a 106 LAKE JUNE F	Business PD MW	Mailing Address	nw		7					
LAKE PLACID, FL						6146 1154 544				
2. Principal Place of Asiness		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01232004	Chg-P	CR2E	(10/03)			
City & State		City & State			4. FEI Numb	52402	181	<u> </u>	oplied For ot Applicable	
Zip	Country Zip		Coun	itry	1	of Status Desire		\$8.75 Add	ditional	
	6. Name and Address of Currer	nt Registered Agent			7. Name and	Address of Ne	w Registered			
BUSINESS FI	ILINGS INCORPORATED		~-	Name Ph. /	1.p W.	State-				
	FFERSON STREET	•		Street Address (P.O. Box Number is Not Acceptable)						
					4.5 H	6427	Sout			
				city Se.6			<u>F</u> i		870	
the obligations	ned entity submits this statement of registered agent			d Agent signature requir		in, in the State of		-04	and accept	
FILE N After May	1, 2004 Fee IS \$150.00 1, 2004 Fee will be \$550	9. Election Camp Trust Fund Cor D DIRECTORS			5.00 May Be dided to Fees	CHANGES TO	DEFICERS AN	D DIRECTOR	S IN 11	
TITLE D		Delete	пти	-	ADDITIONS	CHANGES TO S		Change	Addition	
STREET ADDRESS 10	ARAJAS-ALVAREZ, YADIRA 06 LAKE JUNE RD. NW AKE PLACID, FL 33852			EET ADDAESS ST-ZIP						
TITLE		☐ Delete	TITLE	E	·	· · · · · · · · · · · · · · · · · · ·		Change	Addition	
NAME Street address			NAM STRE	E ET ADORESS						
CITY-ST-ZIP				-ST-ZIP						
TETLE Name		☐ Delete	. TITLE NAM					☐ Change	Addition Addition	
STREET ADDRESS -			STRE	ET ADDRESS						
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LAME			MAM	t						
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS -ST-ZIP						
TITLE		☐ Delete	TITLE					☐ Change	Addition	
,			NAM STRE	E ET ADDRESS						
				-ST-ZIP						
NAME STREET ADDRESS CITY-ST-ZIP								☐ Change	PT A Julia	
STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE	1				C) Operation	Addition	
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	fy that the information supplied wi his report or supplemental report ation or the receiver or trustee em on an attachment with an address		name Stre City	E ET ADDRESS -ST-ZIP	Section 119.07(3)(e same legal effec 07, Florida Statue	i), Florida Statute t as if made und s; and that my h	es. I further co			