

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morlham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P13046** (8)

1. Corporation Name

CITRUS TRADING CORP.



Principal Place of Business

Mailing Address

ATTN: PEGGY MENCHACA
P.O. BOX 1188
HOUSTON TX 77251-1188

ATTN: PEGGY MENCHACA
P.O. BOX 1188
HOUSTON TX 77251-1188

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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

Signature, typed or printed name of registered agent and (if applicable)

(NOTE: Registered Agent Signature required when replacing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **VC**
STREET ADDRESS **BUTTS, ROBERT M.**
CITY- ST- ZIP **1400 SMITH STREET**
HOUSTON TX

TITLE ☐ DELETE

NAME **V**
STREET ADDRESS **HERMANN, ROBERT J**
CITY- ST- ZIP **1400 SMITH STREET**
HOUSTON TX 77002

TITLE ☐ DELETE

NAME **T**
STREET ADDRESS **RIEKEE, PAULA H.**
CITY- ST- ZIP **1400 SMITH STREET**
HOUSTON TX

TITLE ☐ DELETE

NAME **VS**
STREET ADDRESS **MENCHACA, PEGGY B**
CITY- ST- ZIP **1400 SMITH STREET**
HOUSTON TX

TITLE ☐ DELETE

NAME **COBD**
STREET ADDRESS **DURAN, WILLIAM D.**
CITY- ST- ZIP **1400 SMITH STREET**
HOUSTON TX

TITLE ☐ DELETE

NAME **S**
STREET ADDRESS **OVERTUFF, ELAINE V.**
CITY- ST- ZIP **1400 SMITH STREET**
HOUSTON FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT J. HERMANN

VICE PRESIDENT - TAX

4/24/96 673 853-6955
Date Daytime Phone #

CR2E034 (12/95)