

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000003648 (0)

1. Corporation Name

Q R M PRODUCE, CORP.



Principal Place of Business

7800 NE 32ND STREET
MIAMI FL 33122

Mailing Address

7800 NE 32ND STREET
MIAMI FL 33122

2. Principal Place of Business

2a. Mailing Address

21. 7800 NE 32ND STREET

26. State, Apt. #, etc.

22. City & State

27. City & State

23. MIAMI FLORIDA

28. City & State

24. 33122

29. Zip

25. DADE COUNTY

30. Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

01/14/1994

3a. Date of Last Report

03/20/1995

4. FEI Number

65-0465744

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

10. Name and Address of New Registered Agent

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 607.07(2) and 607.15(3), 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 obligation of Section 607.09(5), Florida Statutes.

SIGNATURE

NOTE: Registered Agent must be a resident of Florida

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME: D MORENO, WILFRIDO (SAME)
2. STREET ADDRESS: 7800 SW 92TH STREET
3. CITY & STATE: MIAMI FL
4. NAME: D MARTINEZ, MICHELE
5. STREET ADDRESS: 2500 SW 107 AVENUE 44
6. CITY & STATE: MIA FL
7. NAME: [] DELETE
8. STREET ADDRESS: [] DELETE
9. CITY & STATE: [] DELETE
10. NAME: [] DELETE
11. STREET ADDRESS: [] DELETE
12. CITY & STATE: [] DELETE
13. NAME: [] DELETE
14. STREET ADDRESS: [] DELETE
15. CITY & STATE: [] DELETE

1. TITLE: 'CHAIRMAN of the corporation'
2. NAME: PRESIDENT
3. STREET ADDRESS: Integral
4. CITY & STATE: [] Change [] Addition
5. TITLE: [] Change [] Addition
6. NAME: [] Change [] Addition
7. STREET ADDRESS: [] Change [] Addition
8. CITY & STATE: [] Change [] Addition
9. TITLE: [] Change [] Addition
10. NAME: [] Change [] Addition
11. STREET ADDRESS: [] Change [] Addition
12. CITY & STATE: [] Change [] Addition
13. TITLE: [] Change [] Addition
14. NAME: [] Change [] Addition
15. STREET ADDRESS: [] Change [] Addition
16. CITY & STATE: [] Change [] Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k) 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 or person in power 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WILFRIDO MORENO

WILFRIDO MORENO

15/1/96

305-1998951

CR2E034 (12/95)