SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUS 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO RE STATE: \$375.) PROFIT FLORIDA DEPARTMENT CORPORATION Sandra B. Morth ANNUAL REPORT Secretary of Stal DIVISION OF CORPOR TIONS 1996 **DOCUMENT** # P94000010848 (7) MARY & JOSEPH PRODUCE, INC. Mailing Address Principal Place of Business 7081 15TH ST E 7081 15TH ST E SARASOTA FL 34243 SARASOTA FL 34243 3. Date Incorporated or Qualified 02/03/1994 3a. Date of Last Report 05/01/1995 4. FEI Number Applied For 2a. Mailing Addg 2. Principal Place of Business 65-0471957 1313 6300 ST. W. Not Applicable 21 \$8.75 Additional Suite Apt #, etc Suite, Apr. #, etc. 5. Certificate of Status Desired Fee Required 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State FL Trust Fund Contribution Added to Fees 23 8. This corporation has liability for intangente tax under s. 199 032 Country Country Yes No Florida Statutes 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name TURNER, JOSEPH 7081 15TH ST E Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34243 83 Zip Code 85 84 City Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607.0505. Florida Statutes. SIGNATURE Should be typed or principle on a of a proceeding cot and the stoppin able (96/E)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OF LICERS AND DIRECTORS 13. 12. DELETE 1.1.100 TITLE CR2E034 TURNER, JOSEPH 1.2 NAME NAME 13 STHEET ADDRESS | 1313 7081 15TH ST E STREET ADDRESS SARASOTA FL 34243 14 CITY ST-7IP CITY-ST-ZP Change Ado son DELETE 2.1 TELE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 3 1 11/11/1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CHY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5 1 TITLE TITLE 5.2 NAME 5.3 STREET ADORESS STREET ADDRESS 5.4 CITY - \$1 - 7:P CITY - ST - ZIP Change ____ Addition DELETE 6 1 THILE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADORESS 64 CITY - ST - ZIP 14. I do 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 1 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 husbed empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. CITY-ST-Z-P