## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



31 ORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000031500 (9)

AGRI-SYSTEMS INTERNATIONAL, INC.

Mailing Address Principal Place of Business 9703 S. DIXIE HWY., SUITE 2-B 9703 S DIXIE HIGHWAY MIAMI FL 33156 SUITE 3-G DO NOT WRITE IN THIS SPACE **MIAMI FL 33156** 3. Date Incorporated or Qualified 04/22/1994 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0485899 Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Ζip 8. This corporation owes or has paid the current year Intangible □ No Personal Property Tax due June 30. ☐ Yes 25 30 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 AGUILA, ADOLFO Z ESQ. 6780 CORAL WAY 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 200 **MIAMI FL 33155** City Zip Code 85 11. 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 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 Eliginature, typic for priore it numer of registere conjunit abortific it applies bec (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change TITLE 1 1 TITLE DEL ALCAZAR, GLADYS G 1.2 NAME 7501 S.W. 175TH STREET STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33157** CITY-ST- ZIP 1 4 CITY - ST - ZIP DELETE Chance ☐ Addition 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-2IP CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4 CITY - ST-ZIP CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME

14. Thereby 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 annual report is strue 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 trustne empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of changed, or on an attachment with an address

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.4 CITY-ST-ZIP

61 THE

6.2 NAME 6.3 STREET ADDRESS

**SIGNATURE:** 

STREET ADDRESS

STREET ADDRESS

CITY-SI-ZIP

TITLE NAME

Cludy G. del aleasa

DELETE

☐ Change

Addition

FILED

Feb 10 1998 8:00am

Secretary of State