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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

May 12 1997 8:00am

Secretary of State

Daytime Phone #

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400035067 (5)

COCO'S INTERNATIONAL PACKERS, INC.

Principal Plac	T STREET	Mailing Address 1996 SW FIRST STREET		<u>.,,,,</u>		
MIAMI FL 3313	5	MIAMI FL 33135-1640			3. Date Incorporated or Qualified	3a. Date of Last Report
2 Principal P	lace of Business	2a. Mailing Address	2. Mailing Address		05/10/1994 4. FEI Number	07/24/1996
21		26		65-0539910	Applied For Not Applicable	
Suite Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		a. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Ζιρ	Country	28	Cour	ntrv	Trust Fund Contribution	Added to Fees
24	25	29	30	,	This corporation has liability for in Florida Statutes	Yes No
	g. Name and Address of Cui	rent Registered Agent			10. Name and Address of New Re	gistered Agent
PAU	JLEY, MONICA P			81 Name		
3405 NW 72ND AVE			ŀ	82 Street Ad	dress (P.O. Box Number is Not Acceptab	ole)
	. 102 BLDG. A		L		()	
MIA	MI FL 33012			83		
			ŀ	84 City		85 Zip Code
44 Purcuant	to the provisions of Sections 607.	0502 and 607 1509. Florida Stat	utos the ab	010 00000	annuation a density this atotament for the	FL B Zip Code
office or r	egistered agent, or both, in the Si	iale of Florida. Such change was	s authorized	by the corpor	orporation submits this statement for the plation's board of directors. I hereby accept	of the appointment as registered
	im familiar with, and accept the of	oligations of, Section 607.0505, I	Florida Stati	ites.		
SIGNATURE	Signalure, typed or printed name of registered	l agent and title if applicable (N	OTE: Registered	Agent signaturn reg	guired when reinstating)	DATE
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	
TITLE	DPS	☐ DELETE	1.1 T (T	Æ		Change Addition
NAME	PAULEY, MONICA P		1.2 NA	WE	•	
STREET ADDRESS	3405 NW 72ND AVE. STE.	102 BLDG. A	1.3 STF	NEET ADDRESS		
CHY-ST-ZIP	MIAMI FL 33012		1.4 CIT	Y-ST-ZIP		
TITLE		☐ DELETE	2.1 TIT	LE .		Change Addition
NAME			2.2 NA	ME		
STREET ADDRESS			2.3 STF	REET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
THILE		☐ DELETE	3.1 TIT	·- i		☐ Change ☐ Addition
NAME		32			•	
\$TREET ADDRESS				REET ADDRESS		
CHY-ST-ZIP TITLE		☐ DELETE		Y-ST-ZIP		Chance III Addition
NAMé			4.1 111			Change
STREET ADDRESS			4. 2 NA			
City-St-7IP				LEET ADDRESS		
TITLE		DELETE	9.4 CH 5.1 TITI	Y-ST-Z I P		Change Addition
NAME			5.2 NAI			manufer first towarder
STREET ADDRESS				EET ADDRESS		'
CITY - S1 - 7IP				Y-ST-ZIP		
TITLE		DELETE	6.1 TiTl			Change Addition
NAME			6.2 NA			• • •
STREET ADDRESS				EET ADDRESS		
CHAN CT THE						i

14. I do hereby 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 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 empowered 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.