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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P94000035067 (5)

COCO'S INTERNATIONAL PACKERS, INC.

FILED May 15 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address				### ##################################				
·		•							
1996 SW FIRST STREET MIAMI FL 33135		1996 SW FIRST STREET Miami FL 33135				DO NOT WRITE IN THIS S	PACE		
						3. Date Incorporated or Qualified 05/10/1994		111111111111111111111111111111111111111	
2. Principal Place of Busines	s :	2a. Mailing Address				4, FEI Number	A	Applied For	
21		26				65-0539910	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.					\$8.75 Additional		
22	2	7				5. Certificate of Status Desired	Fee F	Required	
City & State		City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Cou	intry		B. This corporation owes or has paid the curr	eg⊁year Ir	ntangible	
24 25] [2	9	30			Personal Property Tax due June 30.	Yes	□ No	
	d Address of Current Re	gistered Agent				10. Name and Address of New Registered A	gent		
PAULEY, MONIC	A P			81	Name				
3405 NW 72ND			82	Street Ado	dress (P.O. Box Number is Not Acceptable)				
STE. 102 BLDG.					0.0017100	wood (1.0. Dox 110/100/10 10/10/1000ptable)			
MIAMI FL 33012				83			******		
				84	City		85 Zip	Code	
					•	<u>FL</u>		1	
office or registered agent	s of Sections 607.0502 and t, or both, in the State of FI and accept the obligations	orida. Such channe was :	authorizer	d by	the cornors	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appoint	changing pintment a	its registered s registered	
SIGNATURE Signature travelor of	nnted name of registered agont and	tilis d'augustable (NO)	I Banistara	d Ane	nt sinnature requ	vired when reinstating) DATE			
12.	OF LICERS AND DIE		13.	o ngo	in bigriata e rede	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12	
TITLE DPS	011101110111101111	☐ DELETE	1.1 1	TLE		110011101107011111111111111111111111111	Change		
NAME PAULEY, N	IONICA P	—	1.2 NA					1	
STREET ADDRESS 3405 NW	DG. A	ı		ADDRESS			1		
CITY-ST-ZIP MIAMI FL S			1.4 Cf					1	
TITLE		DELETE	2.1 Ti		<u>'*''</u>		Change	Addition	
NAME			2.2 NA					- 1	
STREET ADDRESS					ADDRESS			1	
			2.40						
CITY-ST-ZIP TITLE		DELETE	3.1 TI		11-511		Change	Addition	
NAME			3.2 N/				. -	_ '	
STREET ADDRESS					ADDRESS				
					ST-ZIP				
CITY-ST-ZIP TITLE		DELETE	4.1 TU		71 - 411		Change	Addition	
NAME			4. 2 N				•-	_	
STREET ADDRESS					ADDRESS				
			4400		I				
TITLE		DELETE	5170		1 - £H		Change	☐ Addition	
NAME		H	5.2 N/				. = 😽	_ '	
					ADDRESS				
STREET ADDRESS									
CITY-ST-ZIP		DELETE	5.4 Cf 6.1 Tf		1-ZIP		Change	Addition	
TITLE							C.101.90		
NAME			62 N/		ADDDTEC			•	
STREET ADDRESS			- 1		ADDRESS				
CITY-ST-ZIP	donnation supplied A . B	is filing does not qualify f	64Cl			n Section 119.07(3)(i). Florida Statutes, I further ce	tify that th	ne information	

Indicated on this amount supplies upon an image ocus not quanty or ne exemption stated in section 119.07(3)(). Florida Statutes. I further certify that the information indicated on this amount report or supplienced 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 trusted expowered 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 attriction of the report with an address.