

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
 AMOUNT DUE ON OR BEFORE 8/9/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$275)

PROFIT CORPORATION ANNUAL REPORT 1995



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

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

95 JUL -3 AM 8:47

DOCUMENT # P94000043338 (0)

1. Corporation Name

SHAMROCK PLANTS & PRODUCE, INC.

Principal Place of Business

Mailing Address

100 SOUTHERN BLVD.
 W PALM BEACH FL 33405

1302 KIRK ROAD
 W PALM BEACH FL 33405

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

06/06/1994

2. Principal Place of Business

2a. Mailing Address

21 938 SOUTHERN BLVD

26 938 SOUTHERN BLVD

4. FEI Number

Applied For

65-0505563

Not Applicable

22 Suite, Apt. #, etc

27 Suite, Apt. #, etc

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 City & State

28 City & State

23 WEST PALM BCH FL

28 WEST PALM BCH FL

6. Election Campaign Financing
 Trust Fund Contribution

\$5.00 May Be Added to Fees

24 Zip County

25

County

29

33405

30

PALM

7. This corporation has liability for intangible tax under s. 100.030, Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

BRADEN, DANA D
 2290 10TH AVENUE NORTH
 PENTHOUSE SUITE 800
 LAKE WORTH FL 33461

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 607.0502 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 liable with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE

Signature (handwritten) of current registered agent and the applicable

DATE Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE D
 1.2 NAME FROST, DAVID B
 1.3 STREET ADDRESS 555 KIRK RD. APT. A-100
 1.4 CITY ST ZIP PALM SPRINGS FL 33461

2.1 TITLE D
 2.2 NAME CREMIN, GERARD F
 2.3 STREET ADDRESS 1302 KIRK ROAD
 2.4 CITY ST ZIP W PALM BEACH FL 33405

3.1 TITLE
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY ST ZIP

4.1 TITLE
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY ST ZIP

5.1 TITLE
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY ST ZIP

6.1 TITLE
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY ST ZIP

13. AGENTS AND REGISTERED OFFICES

1.1 TITLE
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY ST ZIP

2.1 TITLE
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY ST ZIP

3.1 TITLE D
 3.2 NAME LAURA SMITH
 3.3 STREET ADDRESS 1801 S "L" STREET
 3.4 CITY ST ZIP LAKE WORTH FL. 33460

4.1 TITLE
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY ST ZIP

5.1 TITLE
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY ST ZIP

6.1 TITLE
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 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 110.07(3)(a), Florida Statutes. I further certify that the information reflected 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 member 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

6/28/95 (407) 333-1100

CR2E004 (3/95)