## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P9400060175 (4)

## **B.Y. BARRERA HARVESTING CORPORATION**

## **FILED** Jul 30 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address							
1394 N.E. WAYNE P.O. BOX 1606 ARCADIA FL 33821 ARCADIA FL 33821					DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated o	r Qualified	3a. Dat	te of Last F	Report
]					08/16/1994		∩4/l	02/1996	·
	lace of Business	2a. Mailing Address			4. FEI Number		<del></del>		pplied For
21		26			59-3277786			N(	ot Applicable
Suite, Apt. #, etc.					5. Certificate of Status	Docirod		\$8.75	Additional
27					o. Certificate of Status	Desired	ш	Fee R	equired
City & Stat	0	City & State			6. Election Campaign F	_	_	\$5.00	May Be
23	Country	[28]			Trust Fund Contribution L Added to Fees				
Zip 24	— <u> </u>	Country Zip Coun		У	8. This corporation owes or has paid the current year Intangible				
24		[25   29   30   30   me and Address of Current Registered Agent			Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent				
la/A		The second of th	8.	Name S	YOU GIANGY		II O O O M	Aeur	
	LDRON, EUGENE E JR.			$\mid  \alpha$	ILMA VAN	NESS			
124 N. BREVARD AVENUE ARCADIA FL 33821				Street Add	ress (P.O. Box Number is N 2091 W.E. Of	ot Acceptabl	e)		
ARU	JAMA PL 33821		83	1	OH W.E. OF	AL DE	7,02		
			84	City	ARCADIA		FL	<b>85</b> Zip	Code 1266
11. Pursuant	to the provisions of Sections 607.050	12 and 607 1508. Florida Statute	s the aho	/e-named cor	ocation submits this statem	ont for the n	FL.	obangina i	266
office or r agent. I a	egistered agent, or both, in the State im familiar with, and accept the oblig	of Forida. Such change was a pations of Section 607.0505, Flo	uthorized b	y the corpora es.	lion's board of directors.	ereby accept	the appo	ointment as	registered
SIGNATURE	Signature, typed or printed name of registered age	ont and little if applicable. (NOTE	Registered Ag	eni signature requ	red when reinstating)	07	- 25	<u>-97</u>	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGE	S TO OFFICE			RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE				[	Change	Addition
NAME	BARRERA, B.Y.		1.2 NAME						
STREET ADDRESS	2019 N.E. OPAL DR., #1		1.3 STREE	I ADDRESS					
CITY-ST-ZIP	ARCADIA FL 33821		1.4 CITY -	ST-ZIP	·/				
TITLE		☐ DELET <b>e</b>	2.1 TITLE				Ĺ	Change	☐ Addition
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREE	T ADDRESS					
CITY-ST-ZIP		DELETE	2. 4 CITY	ST-ZIP	· · · · · · · · · · · · · · · · · · ·			<del></del>	
TITLE NAME		L DELETE	3.1 TITLE				Ĺ	Change	☐ Addition
			3.2 NAME						
STREET ADDRESS				1 ADDRESS					
CITY-ST-ZIP TITLE	<u> </u>	DELETE	3.4. CITY-	S1-ZIP			-	Chann	A Paristan
NAME		i ptrt+r	4.1 TITLE				L	Change	☐ Addition
			4. 2 NAME						
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP TITLE		DELETE	4.4 CITY- 5.1 TITLE	51-ZIP			<del></del> -	Change	Addition
NAME		C >00000	5.1 MILE				L		
STREET ADDRESS			1						
CITY-ST-ZIP			i i	T ADDRESS					ļ
TITLE		DELETE	5.4 CITY - 6.1 TITLE	51-ZIP	· · · · · · · · · · · · · · · · · · ·			Change	Addition
NAME		L. OLCCIL					L	Change	L. Audition
STREET ADDRESS			6.2 NAME	t annbree					
				TADDRESS					İ
CITY-ST-ZIP	- the second sec		6.4 CITY-	S1 - Z#P					

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.