

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 11:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000069128 (4)

1. Corporation Name

ZING FRUIT PRODUCTS CO.

Principal Place of Business

7730 S.W. 68TH TERRACE
MIAMI FL 33143

Mailing Address

7730 S.W. 68TH TERRACE
MIAMI FL 33143

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/20/1984

3a. Date of Last Report

4. FEI Number

65-0536674

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 5712 GRANADA AV.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

CORAL GABLES, FL

28 City & State

29 City & State

24 Zip

33146

25 Country

DADE

29 Zip

30 Country

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION INFORMATION SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

81 Name

ALBERT ABDO

82 Street Address (P.O. Box Number is Not Acceptable)

5712 GRANADA AV.

83

84 City

CORAL GABLES

85 Zip Code

33146

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

Albert Abdo

(Signature, name and address of registered agent and title if applicable)

(NOTE: Registered Agent signature required when registering)

ALBERT ABDO

4/27/95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	ABDO, ALBERTO
STREET ADDRESS	5712 GRANADA AVENUE
CITY - ST - ZIP	CORAL GABLES FL 33146
TITLE	VSD
NAME	ABDO, JOANNE
STREET ADDRESS	5712 GRANADA AVENUE
CITY - ST - ZIP	CORAL GABLES FL 33146
TITLE	D
NAME	ABDO, BEVERLY
STREET ADDRESS	5712 GRANADA AVENUE
CITY - ST - ZIP	CORAL GABLES FL 33146
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	ABDO, ALBERT	
1.3 STREET ADDRESS	5712 GRANADA AV	
1.4 CITY - ST - ZIP	CORAL GABLES, FL 33146	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
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 119.07(3)(b), 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.

SIGNATURE:

Albert Abdo

(Signature and typed or printed name of signing officer or director)

ALBERT ABDO

4/27/95

(Date)

305-669-0630

(Daytime Phone #)