Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90041 036 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500001858 1. Corporation Name

DEL ORG	J JUICE MARKETING, IN			~				
Principal Place of Business Mailing Address								
141 E CENTRAL AVE P O BOX 9086 SUITE 420 WINTER HAVEN FL 33883 WINTER HAVEN FL 33880						·		
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		
	•					01/09/1995		
3 Dringing D	loop of Business	2a. Mailing	Address			4. FEI Number Applied For		
			, 100.000			59-3290754 Not Applica		
21 Suite Ant	# atc		Suite, Apt. #, etc.			\$8.75 Additional		
			.	,		5. Certificate of Status Desired		
City & State	<u> </u>	<u> </u>	City & State			6. Election Campaign Financing S5.00 May Be	1	
		Ь	28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip				8. This corporation owes the current year Intangible		
24 25		29	— ' — —			Personal Property Tax.	j	
9. Name and Address of Current Registered Agent				~~ <u></u>		10. Name and Address of New Registered Agent		
				81	Name			
WARREN, NORMAN O JR 141 E CENTRAL AVE					32 Street Address (P.O. Box Number is Not Acceptable)			
				82				
SUITE 420 WINTER HAVEN FL 33880				83				
				; [
			84	1 1	FL 85 Zip Code			
11. Pursuant office or r agent. I a	to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the ot	,0502 and 607.1508, tate of Florida. Such oligations of, Section	Florida Statutes, t change was autho 607.0505, Florida	he abov rized by Statutes	e-named controls.	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered	ea	
SIGNATURE						guired when reinstating) DATE		
40	Signature, typed or printed name of registered	AND DIRECTORS	, (NOTE: Regi	13.	ur signarure red	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	2	
12.	D. OFFICERS	AND DIRECTORS	☐ DELETE	1.1 TITLE		☐ Change ☐ Ad		
TITLE	•			1.2 NAME				
NAME .	WARITER, ROTHIAN O ON				TADDRESS			
STREET ADDRESS					1	•		
CITY-ST-ZIP				1.4 CITY-5	ST-ZIP	. Change Ad	Idition	
TITLE				2.1 TITLE				
NAME				2.2 NAME		•		
STREET ADDRESS				2.3 STREE	T ADDRESS	•		
CITY-ST-ZIP				2.4 CITY-	ST-ZIP	☐ Change ☐ Ad	Idition	
TITLE	· '		☐ DELETE	3.1 TITLE	ļ	☐ Change ☐ Ad	JG(UO) I	
NAME				3.2 NAME		•		
STREET ADDRESS				3.3 STREE	T ADDRESS			

6.4 CITY-ST-ZIP CITY-ST-ZIP 5 14. I 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, with all other like empowered.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 TITLE .

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

☐ DELETE

☐ DELETE

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CITY-ST-ZiP

STREET ADDRESS

STREET ADDRESS

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CITY-ST-ZIP

CITY-ST-ZIP

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NAME

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TITLE

NAME

ENTERED WAR 2 F 4999

Change

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Change

Addition

Addition

Addition