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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

1996 OCUMENT # P95 COCONUTZ TRADING CON	5000035675 (4)		 	
Principal Place of Business 864 CUMBERLAND TERRACE DAVIE FL 33325	Mailing Address 864 CUMBERLAND TERR DAVIE FL 33325	ACE		
			3. Date Incorporated or Qualified 05/08/1995	3a. Date of Last Report
. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
	26 Suite Ant # etc		65-0590232	Not Applicable \$8.75 Additional
Suite, Apt. #, etc.	Suite, Apt #, etc.			Fee Required
City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country		Gountry	8. This corporation has liability for int	tangible tax under s. 199.032,
25	29	30	Florida Statutes Yes 10. Name and Address of New Re	□No
9. Name and Address	of Current Registered Agent	81 Name	10, Maille and Address of New Re	9
MESSINA, MICHAEL 864 CUMBERLAND TERRACE DAVIE FL 33325		83 84 City	ress (P.O. Box Number is Not Acceptable	E1 85 Zip Code
SIGNATURE Signal are typed or printed name of no. OFF	s 607,0502 and 607,1508, Florida Statutes atte of Florida. Such change was authorized as of, Section 607,0505, Florida Statutes. Section 607,0505 Florida Statutes Prof. Prof.	E Registered Agent signature recipro	d where recitings ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE PSTD CONIGLIO, STANLE STREET ADERESS 864 CUMBERLAND	-Y	1 2 NAME 1 3 STREET ADDRESS	Jose Is a 40 e Dave, H 933:	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
DAVIE FL 33325	☐ DELET€	1.4 C/TY - S1 - Z/P 2 1 TICLE	Diver, C Co	Change Addition
TITLE NAME		2.2 NAME		
STREET ADORESS		23 STREET ADDRESS	Online 4 775	27260
CITY-ST-ZIP TITLE NAME	€ DELETE	24 CIFY - ST- ZIP 3 1 TITLE . 32 NAME	30000173 -04/11/96011 ***200,00	12-012 Change Addition
STREET ADDRESS		33 STREET ADDRESS		
C(TY-ST-ZiP	DELF1E	3 4 CITY - ST - ZIP 4. 1 TITLE		Change Addition
NAME	_	4.2 NAMÉ		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-7IP	DETEIF	5 1 TILE		Change Addition
NAME		5.2 NAME		
STREET ACORESS		5.3 STREET ADDRESS		
CITY - ST - ZIP	DELETE	54 CHY - ST - ZIP 6 1 TITLE		Change Addition
TITLE		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP	on supplied with this filing is voluntarily fun	64 CITY-S1-ZIP nished and does not qualif	y for the exemption stated in Section 119	0.07(3)(k), Florida Statutes. I further
certify that the information indicated	on supplied with this filing is voluntarily fur i on this amul report or supplemental are of the corporation or the receiver or trust changed, or on or attachment with an add	ee en powered to execute	this report as required by Chapter 607, F	londa Statutes; and that my hame
SIGNATURE:	AND TYPED OR PRINTED NAME OF SIGNING OFFICE	ER OR DIRECTOR	1/29 /	6 305-474-4040 CS 4/11/96