

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

FILED
Jan 25, 1999 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

01-25-1999 90040 012 ****150.00

DOCUMENT # P95000089840

1. Corporation Name
THE CLARUS JUICE COMPANY



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
 329 HAMILTON SHORE NE 329 HAMILTON SHORE NE
 WINTER HAVEN FL 33881 WINTER HAVEN FL 33881
 US US

3. Date incorporated or Qualified
11/22/1995

4. FEI Number Applied For
59-3352962 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Election Campaign Financing **\$5.00** May Be Added to Fees
 Trust Fund Contribution

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business 2a. Mailing Address

21 26

Suite, Apt. #, etc. Suite, Apt. #, etc.

22 27

City & State City & State

23 28

Zip Country Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

GUNTER, KRISTEN C
1720 S FLORIDA AVE
LAKELAND FL 33803

10. Name and Address of New Registered Agent

81 Name

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

83

84 City 85 Zip Code
FL

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, 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 _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME **P**
CHEN, CHIN SHU

STREET ADDRESS **329 HAMILTON SHORE NE**
WINTERHAVEN FL 33881

CITY-ST-ZIP

TITLE DELETE

NAME **VP**
CHEN, WILLIAM A

STREET ADDRESS **204 NEWCASTLE CT**
REDWOOD CITY CA 94061

CITY-ST-ZIP

TITLE DELETE

NAME **T**
CHEN, HOPE X

STREET ADDRESS **204 NEWCASTLE CT**
REDWOOD CITY CA 94061

CITY-ST-ZIP

TITLE DELETE

NAME **S**
CHEN, GRACE A

STREET ADDRESS **329 HAMILTON SHORE NE**
WINTER HAVEN FL 33881

CITY-ST-ZIP

TITLE DELETE

NAME **AS**
CHEN, IRENE S

STREET ADDRESS **329 HAMILTON SHORE NE**
WINTER HAVEN FL 33881

CITY-ST-ZIP

TITLE DELETE

NAME _____

STREET ADDRESS _____

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

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 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.

SIGNATURE: CHIN SHU CHEN DATE: 1/4/99 DAYTIME PHONE #: (94) 298-8106

CR2E034 (11/98)