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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Mar 12 1997 8:00am

Secretary of State

96/6)

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

CITY - ST - ZIP

SIGNATURE:

appears in Block 12 or Block 13 if changed,

DOCUMENT # P96000019678 (7)

SOUTHERN SUN PRODUCE, INC.

Principal Place of Business Mailing Address 1112 WEST SHELL POINT ROAD 1112 WEST SHELL POINT ROAD RUSKIN FL 33570 RUSKIN FL 33570-3455 3. Date Incorporated or Qualified 3a. Date of Last Report 02/26/1996 2. Principal Place of Business Mailing Address FEI Number Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
Yes
No 24 Yes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 TICHY, MARK R 1112 WEST SHELL POINT ROAD Street Address (P.O. Box Number is Not Acceptable) RUSKIN FL 33570 83 84 City Zip Code 85 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 Signature Typed or proted name of registered agent and title diapplicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change TICHY, MARK R NAME 1.2 NAME STREET ADDRESS 1112 WEST SHELL POINT ROAD 1.3 STREET ADDRESS **RUSKIN FL 33570** CITY - ST - ZIF 1.4 CITY - ST - ZIP THLE DELETE Change 2.1 TITLE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CHY-SI-ZW 2 4 CITY-ST-ZIP TITLE DELETE 31 TITLE Addition NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-749 3 4. CITY-ST-ZIP DELETE THE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-S1-ZIF 4.4 City - St - ZiP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHY-ST-ZIP 5.4 CITY - ST - ZIP DELETE THE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ACORESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. 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

or on an attachment with an address.