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

P96000035990

Mailing Address

AGROSALE, INC.

Principal Place of Business

DOCUMENT #

FILED Jan 29, 1999 8:00am Secretary of State

01-29-1999 90023 026 ***150.00

	1911 861 1881

1335 NW 21 T BAY #7 MIAM! FL 3314 US		PO BOX 1038 Miami FL 33197 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
00					04/25/1996			
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		Applied For	
1	26			65-0680783				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		***		\$8.75	Additional	
أ أ		27			5. Certificate of Status Desired	, +	Required	
City & Sta		City & State			6. Election Campaign Financing		May Be	
3		28			Trust Fund Contribution		d to Fees	
Zip	Country	Zip	Country		This corporation owes the current year Intangible			
<u>- آ</u>	25	29 30			Personal Property Tax,			
71	9. Name and Address of Current		30,		10. Name and Address of New Regis			
	\$ - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	13000	81	Name				
FER	RER. ERNESTO	the transfer of the state of th		l				
	21 SW 312TH STREET		82	Street Add	iress (P.O. Box Number is Not Acceptable)			
	MESTEAD FL 33030		83		There is the first district the first	of tamature story	1 · 5 ** 9 = 10 + 3 4 4 4	
1101	NEOTEAD TE 33030		63	'	- "我就是这个是一个			
			84	City	र इसे प्रारंकित में भी में हैं है में हैं है।		p Code ^{val} (46)	
				<u>L.</u>	poration submits this statement for the purp ion's board of directors. I hereby accept the	FL	·	
12.	Signature, typed or printed name of registered agent OFFICERS AND	DIRECTORS	13.	int signature requir	ADDITIONS/CHANGES TO OFFICE			
TITLE	PTD	☐ DELETE	1.1 TITLE		25.数据 15G。	☐ Chang	e	
NAME	Ferrer, Ernesto		1.2 NAME					
STREET ADDRESS	22121 SW 312TH STREET		1.3 STREE	T ADDRESS				
CITY-ST-ZIP	HOMESTEAD FL 33030		1.4 CITY-S	T-ZIP				
TITLE	SD	☐ DELETE	2.1 TITLE			Change	e	
NAME	Ferrer, Bertha L		2.2 NAME					
STREET ADDRESS		•	2.3 STREE	T ADDRESS				
CITY-ST-ZIP	HOMESTEAD FL 33030	the cost to be been been been	2. 4 CITY-5	ST-ZIP				
TITLE	2 37 4 5 74 15	DELETE	3.1 TITLE			☐ Chang	e 🔲 Addition	
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CITY-ST-ZIP	ESTER RET		3.4. CITY-5	ST-ZIP				
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VAME			4.2 NAME					
STREET ADDRESS	- The state of the	10. 10. 10. 10. 10. 10. 10. 10. 10. 10.		T ADDRESS	** *			
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TITLE		DELETE	5.1 TITLE	1-211		☐ Chang	e	
VAME:		<u> </u>	5.2 NAME		Programme and the second			
STREET ADDRESS		1 × 1 / 1		TADORESS	$T^{3}_{i,k}$ (i.e., $T^{i,k}$).	•	ſ	
	P(5)		5.4 CITY-S	i				
CITY-ST-ZIP	FAT ROT, Dr. No. 10	☐ DELETE	6.1 TITLE	1-21	A STREET AND A STREET	☐ Chang	e	
	22121 SW 31/16 ST YOU	□ perei¢	6.2 NAME	1		☐ Criang	Addition	
NAME .	HATELON TO THE		0.2 DV0VIE	T ADDDTES			· [

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.

6.4 CITY-ST-ZIP

SIGNATURE

ATTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-08-99 (305) 549-7700

CR2F0341/14/98)