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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000039584

**GUTIERREZ HARVESTING, INC.** 

Principal Place of Business Mailing Address 3583 N.W. 10TH AVE. 3583 N.W. 10TH AVE. OKEECHOBEE FL 34974 OKEECHOBEE FL 34974 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/02/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0683808 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. □ No 24 29 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name STARK, DIANA G 3583 N.W. 10TH AVE. **B2** Street Address (P.O. Box Number is Not Acceptable) **OKEECHOBEE FL 34974** 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, typoid or printed name of registered agent and little if applicable. (NOTF: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE **GUTIERREZ. GUADALUPE R** NAME 1.2 NAME 3583 N.W. 10TH AVE. 1.3 STREET ADDRESS STREET ADDRESS **OKEECHOBEE FL 34974** CITY-ST-ZIF 1.4 CITY - S1 - ZIP DELETE Change Addition TITLE 2.1 THLE STARK, DIANA G 2.2 NAME NAME 1105 N.W. 4TH STREET STREET ADDRESS 2.3 STREE1 ADDRESS **OKEECHOBEE FL 34972** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP City-St-ZIF DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - S1 - ZIP CITY-ST-ZIF DELETE Change Addition TITLE 5.1 TITLE NAME 5 2 NAME STREET ADDRESS 53 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIF DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 63 STHEET ADDRESS 6.4 CITY - ST - ZIP City-St-ZiP

14. hereby certily 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 eath; 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.

SIGNATURE: Juadalufa R

3-30-98

941-763-2555

**FILED** 

Apr 03 1998 8:00am

Secretary of State