

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

FILED
Feb 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000069465 (8) 1. Corporation Name WEST INDIAN PRODUCE, INC.			
Principal Place of Business 1306 NW 125TH TER. SUNRISE FL 33323 8635 NW 68 TH STREET MIAMI FL 33166		Mailing Address 1306 NW 125TH TER. SUNRISE FL 33323 8635 NW 68 TH STREET MIAMI FL 33166	
2. Principal Place of Business 21 8635 NW 68 TH STREET Suite, Apt. #, etc. 22 MIAMI City & State 23 FLORIDA Zip 24 33166		2a. Mailing Address 26 8635 NW 68 TH STREET Suite, Apt. #, etc. 27 City & State 28 MIAMI FLORIDA Zip 29 33166	
9. Name and Address of Current Registered Agent GRAMMER, EDWIN L 3801 N. UNIVERSITY DR., #318 SUNRISE FL 33351 HALRIC FLETCHER 8635 NW 68 TH STREET MIAMI FL 33166		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	
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.		3. Date Incorporated or Qualified 08/19/1996 4. FEI Number 65-0691155 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
SIGNATURE <i>H. Fletcher</i> Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)		DATE 2-2-98	
12. OFFICERS AND DIRECTORS TITLE D NAME FLETCHER, HALRIC STREET ADDRESS 1306 NW 125TH TER. CITY-ST-ZIP SUNRISE FL 33323 8635 NW 68 TH STREET MIAMI FL 33166 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 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)(j), 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.			
SIGNATURE: <i>H. Fletcher</i>		9-2-98 305 597 9998	

CR2E034 (10/97)