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 # P9600083469 (2)

FLAMINGO FRUIT JUICE, INC.

FILED Apr 13 1998 8:00am Secretary of State

Principal Place of Business		Mailing Address		
2179 N.W. 24TH COURT		2179 N.W. 24TH COURT	T	
MIAMI FL 33142		MIAMI FL 33142		DO NOT MIDITE IN THIS SDACE
				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
				10/09/1996
2. Principal P	Place of Business	2a, Mailing Address	······································	4. FEI Number Applied For
21		26		65-0700475 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		\$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25]	[29]	[30]	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
L 1994	9. Name and Address of Current	uedisteten Waetit	81 Name	10, Name and Address of New Registered Agent
VENTURA, TERESA			Traine	
11310 S.W. 52 TERRACE MIAMI FL 33165			82 Street Add	dress (P.O. Box Number is Not Acceptable)
. M97	AMI PL 33105		83	
1				
١			84 City	FL 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				
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.				
CIONATURE				
SIGNATURE.	Signature, typed or printed name of represent age:	and the itapplicable (NC	He Registered Agent signature requ	uired when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PS	☐ DELETE	1.1 TITLE	L. Change L. Addition
NAME	VENTURA, TERESA V		1.2 NAME	
STREET ADDRESS	11310 S.W. 52 TERRACE		1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33165	DELETE	1.4 C/TY - ST - Z/P	Channe D Meline
TITLE	CONTALET UNUBERTO	L] DELETE	21 TITLE	☐ Change ☐ Addition
NAME	GONZALEZ, HUMBERTO 11310 S.W. 52 TERRACE		22 NAME	
STREET ADDRESS	MIAMI FL 33165		2 3 STREET ADDRESS	
CITY-ST-ZIP TITLE	MIMIE FE 33 103	DELETE	2 4 CITY-ST-ZIP 31 TITLE	Change Addition
NAME		berett	3.2 NAME	Villago Lia riottoli
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3 4. CITY - ST - ZIP	
TITLE		DELETE	4.1 THILE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZiP			4.4 City+St-ZiP	
TITLE		☐ DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CHY-ST-ZIP			6.4 CITY-ST-ZIP	

14. Thereby 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 this corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an affactment with an address.

OLON: ATURE

Commen V. Hentura

3/9/98

305-583-433