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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE: /



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000104095 (0)

THE FORBIDDEN FRUIT INC.

FILED Jun 04 1998 8:00am Secretary of State



4/30/98

Principal Place of Business Mailing Address C/O MARK VOGEL C/O MARK VOGEL 1325 S CONGRESS AVE SUITE 232 1325 S CONGRESS AVE SUITE 232 DO NOT WRITE IN THIS SPACE **BOYNTON BEACH FL 33426 BOYNTON BEACH FL 33426** 3. Date Incorporated or Qualified 01/01/1997 2. Principal Place of Business Applied For 5-07/6/37 Not Applicable \$8.75 Additional Fee Required City & State \$5.00 May Be 6, Election Campaign Financing Trust Fund Contribution Adde∯ to Fees 8. This corporation owes or has paid the current year Intangiale Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent B1 vogel, lee C/O MARK VOGEL 1325 & CONGRESS AVE SUITE 232 83 **BOYNTON BEACH FL 33426** 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named col bmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Honda. Such change was authorized by the corporagent. Lam familiar with, and accept the obligations of Section 607.0505, Florida Statutes. on's board of directors. I hereby accept the appointment as registered 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE 10 mark vopel co-owner STREET ADURESS CITY-S1-ZIP 14 CITY-ST-ZIP Change Addition TITLE STREET ADDRESS 2.3 STREET ADDRESS 2.4 City - \$1 - ZiP CITY-ST-ZIP Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME 5 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 14. Thereby certify that the information supplied with this filting 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 suppliemental 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 empswered 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.