## 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 #** 1. Corporation Name

P97000007574 (1)

REDUCE FAMERS INC

HEDI OFFWILLIO, IIIO		,
Principal Place of Business	Mailing Address	
10653 WILES ROAD CORAL SPRINGS FL 33076	10653 WILES ROAD CORAL SPRINGS FL 33076	
		-
2. Principal Place of Business	2a. Mailing Address	
21	26	

FILED May 22 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/27/1997 Applied For Not Applicable \$8.75 Additional Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country  $Z_{1D}$ Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent IZA, DAVID CHMDDAA 10653 WILES ROAD **CORAL SPRINGS FL 33076 R3** 11. Pursuant to the provisions of Sections 607.05.02 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. Lap familiar with, and accept the obligations of Section 697.0505, Florida Statutes. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. **DELETE** ☐ Change TITLE 1.17016 IZA, DAVID NAME 1.2 NAME 10653 WILES ROAD STREET ADDRESS 1.3 STREET ADDRESS **CORAL SPRINGS FL 33076** CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change Addition 2.110116 TITLE MARRERO, FRANCISCO NAME 2.2 NAME 10653 WILES ROAD STREET ADDRESS 2.3 STREET ADDRESS CORAL SPRINGS FL 33076 2. 4 City - St - 7/E CITY+ST-ZIP DELFTE ☐ Change Addition TITLE WILFLEDO CACDOM NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 0653 WILES 33076 ELIZABETH CARDONA 3.4 CITY-ST-ZIP CITY-ST-ZIF DELETE Addition 4.1 TITLE TITLE COME SPUNGS. FL **4.2 NAME** STREET ADDRESS 4.3 STHEET ADDRESS 330**16** CITY-ST-ZIP 4.4 City-St-ZIP DELFTE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition 6.1 TITLE TITLE 600002534776 6.2 NAME NAME -05/26/98--01035--010 6.3 STREET ADDRESS STREET ADDRESS \*\*\*150.00 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 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

4-16-98 (956) 346-7220