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

P97000012840 (9) DOCUMENT #

START FRESH PRODUCE, INC.

FILED May 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
2401 WEST WOODY AVENUE 2401 WEST WOODY AVEN			ENUE			
PLANT CITY FL \$3567		PLANT CITY FL 33567			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified
						02/07/1997
	Place of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				59-342 4445 Not Applicable
Suite, Apt.	#, eic.	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional
22		27			Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
Zip Country		Zin Country			Trust Fund Contribution Added to Fees	
24		Zip	\vdash	Country		8. This corporation owes or has paid the current year Intangible
24	25 9. Name and Address of Current	29 Registered Agent	30	0		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
וח	ICHEMIN, ROBERT A	Trogiotorou rigotii		81	Name	10. Hante and Address of New Hogistered Agent
	1 SOUTH ORANGE AVE					
	RLANDO FL 32801		82 Street Ad		Street Add	dress (P.O. Box Number is Not Acceptable)
				83		
			-	84	City	85 Zip Code
44 Discount	to the provisions of Continue COZ 04 00					FL S Z COOK
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						,
12.	Signature typed or printed name of registered agent OFFICERS AND		18. Registered	Ager	ni signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D			LĒ		Change Addition
NAME	I ALIOUTED DODDIE W		1.2 NA			
STREET ADORESS	2401 W. MOODY AVENUE		1.3 STREET ADDRE		ADDRESS	
CITY-ST-ZIP	PLANT CITY FL 33567			Y-ST		
TITLE	117		2.1 TiT		- 211	☐ Change ☐ Addition
NAME	GARCEAU, JAMES		2.2 NA			
STREET ADDRESS	\$156 YORYCH LANE				ADDRESS	
CITY-ST-ZIP	Örlando Fl 32822	2.40				•
TITLE	DELETE			3.1 TITLE		Change Addition
NAME	BUELL, WILLIAM T		3.2 NA	3.2 NAME		
STREET ADDRESS	6436 LONG OAK COURT		3.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33811	LAKELAND FL 33811		TY-S1	T-ZIP	
TITLE	D	December 411				Change Addition
NAME	RAINEY, DOUGLAS		4. 2 NA	ME		
STREET ADDRESS	808 WEST AMELIA STREET		4.3 ST	4.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32805		4.4 CITY		- ZIP	
TITLE		☐ DELETE	5.1 TIT	LE		Change Addition
NAME			5.2 NA	ME		
STREET ADDRESS			5.3 STF	REET A	ADDRESS	
CITY-ST-ZIP			5.4 CIT	Y - ST	- ZIP	
TITLE	☐ DELETE 6		6.1 T(T	L E		☐ Change ☐ Addition
NAME			6.2 NA	ME		
STREET ADDRESS			6.3 STF	REET A	ADDRESS	
CITY-ST-ZIP	_		6.4 CIT	Y-SF	- ZIP	

14. I hereby 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 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 in changed, or on an attachment with an address.