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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED Apr 05, 1999 8:00 am Secretary of State

04-05-1999 90013 049 ***150.00

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000013362

Principal Place of Business

SIGNATURE:

GARLIC PRODUCTION CORPORATION

1780 BRYAN AVE		P.O. POX 1283 WINTER PARK FL 32790				DO NOT INDITE IN THIS SPACE					
WHILE PARK IT 02/03		US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed					
					3.	02/04/1997	Qualifed			1	
		2a. Mailing Address		_	4.	FEI Number 69	- 21140	1757	Ap	plied For	
2. Principal Place of Business		<u> </u>			4	ان ر	241	1 10 1	No	t Applicable	
21		Suite, Apt. #, etc.				O Charles of Charles	Dasirad		\$8.75 A		
Suite, Apt. #, etc.		27	¬ `` ' '			. Certifcate of Status	Desired		Fee Re	quired	
City & State		City & State				. Election Campaign	inancing	П	\$5.00		
23		28	8			Trust Fund Contribu		<u>, ''</u>	Added t	o.Fees	
Zip	Country	Zip	Country		8.	. This corporation ow		ent year Inta	ingible ` ∐Yes	XNo	
24	25	29 30	<u>ol</u> _			Personal Property T Name and Address	ax.	Ponistered A			
	9. Name and Address of Curren	t Registered Agent	81	Name	10	, Name and Address	S OI INGW I	(ogisterou /	- gorit		
	NOT EDIANG		81	Name							
	NT, FRANK L		82 Street Ad			ddress (P.O. Box Number is Not Acceptable)					
	BRYAN AVE		230 83			Amer -	100-				
WINT	ER PARK FL 32789		83								
			84	City	WIE G	DARY	•	Fl	85 Zip (Code 1789	
				WI	Olek	on submite this statem	ent for the	purpose of	changing its	registeren	
11. Pursuant t	o the provisions of Sections 607.050 gistered agent, or both, in the State	2 and 607.1508, Florida Statutes of Florida, Such change was auth	, the above horized by	e-named of the corpo	corporation's b	poard of directors. I he	reby accer	pt the appoi	ntment as re	gistered '	
office or re agent. I an	gistered agent, or both, in the State n familiar with, and accept the obliga	tions of, Section 607.0505, Florid	la Statutes	.						j	
OLONIA TUDE			egistered Age		acuired when	reinstating)		DATE			
	Signature, typed or printed name of registered age	ID DIRECTORS	13.	it signature i	V42	ADDITIONS/CHANG	ES TO OF	FICERS AN	D DIRECTO	ORS IN 12	
12.		DELETE	1.1 TITLE						☐ Change	☐ Addition \	
TITLE	D Lorant, Frank L		1.2 NAME	Ì							
NAME	1780 BRYAN AVE		1.3 STREE	T ADDRESS							
STREET ADDRESS	WINTER PARK FL 32789		1.4 CITY-S	i							
CITY-ST-ZIP	D D	☐ DELETE	2.1 TITLE	, i					Change	☐ Addition	
TITLE	LORNAT, SUSAN		2.2 NAME			0	1) to				
NAME	1780 BRYAN AVE		2.3 STREE	T ADDRESS	230	BREWER	HUE	•			
STREET ADDRESS	WINTER PARK FL 32789		2. 4 CITY-	ST-ZIP						□ Addition	
CITY-ST-ZIP	D	☐ DELETE	. 3.1 TITLE						Change	Addition	
NAME	LORANT, STACIE		3.2 NAME			D00	121	9			
STREET ADDRESS	1780 BRYAN AVE	* ***	3.3 STREE	T ADDRESS	230	BREWER	י רוטפ	٠.	-		
CITY-ST-ZIP	WINTER PARK FL 32789		3.4. CITY-	ST-ZIP					Change	☐ Addition	
TITLE		☐ DELETE	4.1 TITLE						☐ Change	L Accepti	
NAME			4. 2 NAME	<u> </u>	1						
STREET ADDRESS			4.3 STREE	ET ADDRESS							
CITY-ST-ZIP			4.4 CITY-						Change	Addition	
TITLE		☐ DELETE	5.1 TITLE							<u></u>	
NAME			5.2 NAME								
STREET ADDRESS	- , .			ET ADDRESS	-						
CITY-ST-ZIP			5.4 CITY-		 		<u>-</u> -	<u></u>	Change	☐ Addition	
TITLE		☐ DELETE	6.1 TITLE		[_	
NAME			6.2 NAME		.]						
STREET ADDRESS				ET ADDRESS	1						
CITY-ST-ZIP	certify that the information supplied v	101 101 101 101 101 101 101 101 101 101	6.4 CITY-		d in Secti	ion 119.07(3)(i). Florid	ia Statutes	. I further ce	rtify that the	information	
14. I hereby of indicated	certify that the information supplied von this annual report or supplement	vith this filing does not qualify for al annual report is true and accur	rate and th	at my sign	nature sh	all have the same leg	al effect as	if made und	ler oath, tha	t I am an pears in	
officer or	on this annual report or supplement director of the corporation or the rec or Block 13 it shanged, or on an atta	eiver or trustee empowered to ex schment with an address, with all	ecute this other like	report as empowere	requirea ed.	by Chapter our, Flor	,,	-,		•	
BIOCK 12	OI BIOCK TO ILEATING IGEO, OI OIT AIT GIVE) A . G	r - 0		_	1/_	100	•			