


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

FILED

May 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000018851 (0)
1. Corporation Name
FRUIT STOP, INC.

Principal Place of Business: 18321 N.E. 20TH AVENUE, NORTH MIAMI BEACH FL 33177
Mailing Address: 18321 N.E. 20TH AVENUE, NORTH MIAMI BEACH FL 33177



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 1835 N.E. 185th St, Suite, Apt. #, etc.
2a. Mailing Address: 18321 N.E. 20th Avenue, Suite, Apt. #, etc.
21, 22, 23, 24, 25, 26, 27, 28, 29, 30

3. Date Incorporated or Qualified: 02/28/1997
4. FEI Number: 65-0735025
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

9. Name and Address of Current Registered Agent: WHITTAKER, LAURIE S, 1085 N.E. 1085 N.E. 125TH SUITE 300, NORTH MIAMI BEACH FL 33179
10. Name and Address of New Registered Agent: DENNIS JAGGERNAUTH, 18321 N.E. 20th Ave, North Miami Beach, FL 33179
81, 82, 83, 84, 85

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: [Signature] DATE: [Date]

12. OFFICERS AND DIRECTORS
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: PD NAME: JAGGERNAUT, MARIA STREET ADDRESS: 18321 N.E. 20TH AVENUE CITY-ST-ZIP: NORTH MIAMI BEACH FL 33179	<input type="checkbox"/> DELETE	1.1 TITLE: PD 1.2 NAME: JAGGERNAUTH MARIA 1.3 STREET ADDRESS: 18321 N.E. 20th Ave. 1.4 CITY-ST-ZIP: North Miami Beach FL 33179	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VD NAME: JAGGERNAUT, DENNIS STREET ADDRESS: 18321 N.E. 20TH AVENUE CITY-ST-ZIP: NORTH MIAMI BEACH FL 33179	<input type="checkbox"/> DELETE	2.1 TITLE: JAGGERNAUTH DENNIS 2.2 NAME: JAGGERNAUTH DENNIS 2.3 STREET ADDRESS: SAME Address 2.4 CITY-ST-ZIP: SAME Address	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: SD NAME: NEGRON, GEORGE STREET ADDRESS: 18321 N.E. 20TH AVENUE CITY-ST-ZIP: NORTH MIAMI BEACH FL 33179	<input checked="" type="checkbox"/> DELETE	3.1 TITLE: 3.2 NAME: 3.3 STREET ADDRESS: 3.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D NAME: JAGGERNAUT, DENNIS STREET ADDRESS: 18321 N.E. 20TH AVENUE CITY-ST-ZIP: NORTH MIAMI BEACH FL 33179	<input type="checkbox"/> DELETE	4.1 TITLE: JAGGERNAUTH DENNIS 4.2 NAME: JAGGERNAUTH DENNIS 4.3 STREET ADDRESS: SAME Address 4.4 CITY-ST-ZIP: SAME Address	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D NAME: NEGRON, GEORGE STREET ADDRESS: 18321 N.E. 20TH AVENUE CITY-ST-ZIP: NORTH MIAMI BEACH FL 33179	<input checked="" type="checkbox"/> DELETE	5.1 TITLE: 5.2 NAME: 5.3 STREET ADDRESS: 5.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> DELETE	6.1 TITLE: 800002530548 6.2 NAME: -05/20/98--01087--050 6.3 STREET ADDRESS: ***158.75 6.4 CITY-ST-ZIP:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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 if changed, or on an attachment with an address.

SIGNATURE: DENNIS JAGGERNAUTH 5/16/98

CR2E034 (10/97)