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

Mailing Address

610 SE 13 ST. STE 204-20

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700096629

1. Corporation Name

STRAWBERRY, INC.

Principal Place of Business

610 SE 13 ST. STE-284

NAME

STREET ADDRESS

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==		<u></u>
	DO NOT WRITE IN THIS SPACE	ì
	Date Incorporated or Qualifed 11/12/1997	ì
	4. FEI Number Applied For	
	65-0794037 Not Applicable	i
	5. Certificate of Status Desired S8.75 Additional Fee Required	
	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
	8. This corporation owes the current year Intangible Personal Property Tax. Yes No	:
	10. Name and Address of New Registered Agent	ı
)¢7	TAVO SANCHEZ	
Idres O	ss (P.O. Box Number is Not Acceptable)	
	14 FL 85 Zip Code 23604	
propration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered		
2001	3-13-28	
ired v	when reinstating) DATE	6
	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	11/98)
	☐ Change ☐ Addition	Ξ

Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90099 046 ***150.00

DANIA FL 33004-4639 DANIA FL 33004-4639 2a. Mailing Address 2. Principal Place of Business 26 21 Suite, Apt, #, etc. Suite, Apt. #, etc. 22 27 City & State City & State 28 23 Country Country Zip Zip 25 30 29 24 9. Name and Address of Current Registered Agent 81 Name SCHWEITZER, CHARLES E 82 Street A 1040 BAYVIEW DR., #320 -FT. LAUDERDALE-FL-00004-2542 83 84 City Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named of office or registered agent, or both, in the State of Florida. Such change was authorized by the corporagent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE OFFICERS AND DIRECTORS 13. 12. DELETE 1.1 TITLE TITLE SANCHEZ, OCTAVIO 1.2 NAME NAME 610 SE 13 ST., STE. 204 200 1.3 STREET ADDRESS STREET ADDRESS DANIA FL 33004-4639 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE ☐ Change 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY+ST-ZIP Change Addition ☐ DELETE 5.1 TITLE TIFLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 6.1 TITLE [] Change Addition TITLE

CITY-ST-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 with all other like empowered.

62 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP