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 # P97000105167 (5)

FILED May 21 1998 8:00am Secretary of State

FERNA	NDEZ FI	SHERY, INC.							
Principal Plac	e of B usines	S	Mailin	ng Address					
1429 WALDE	N OAKS PLA	ÇE	P.O.	BOX 3114					
PLANT CITY FL \$3566 PLANT CITY FL (33564-3114			DO NOT WRITE IN THIS CRACE	
								DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
								12/15/1997	
2. Principal P	Place of Busi	Country 25 Name and Address of Current R DEZ, VICKI ALDEN OAKS PLACE NITY FL 33566 Provisions of Sections 607,0502 a ed agont, or both, in the State of diar with, and accept the obligation C. Igned or practice of registered agreet an OFFICERS AND D RNANDEZ, MARIO		2a, Mailing Address				4. FEI Number Applied For	
21			26	g / ttulious				Not Applicable	
Sulte, Apt. #, etc.				Suite, Apt. #, etc.				SR 75 Additional	
22			27	27				6. Certificate of Status Desired Fee Required	
City & State			Cit	City & State				Election Campaign Financing \$5.00 May Be	
23			28					Trust Fund Contribution Added to Fees	
Zip] Z _I	P	 	intry		8. This corporation owes or has paid the current year Intangible	
24	<u> </u>		29		30			Personal Property Tax due June 30. Yes No	
			rent Register	negistered Agent			10. Name and Address of New Registered Agent Name		
						81	INATITE		
							Street Ad	ddress (P.O. Box Number is Not Acceptable)	
PL	ANT CITY	-L 33566				83			
						84	City	FL 85 Zip Code	
11. Pursuant office or r agent. I a	to the provis registered ag im familiar w	ions of Sections 607.0 jent, or both, in the St th, and accept the ob	0502 and 607. ate of Florida oligations of, Sc	1508, Florida Statut Such change was a ection 607.0505, Flo	es, the a authorize orida Sta	bove d by tutes	e-named co the corpor	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered	
SIGNATURE			····						
10	Signature, typied				: Registere	d Age	nt signature req	adulted when reinstating) ADD/TIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	D	OFFICENS	MNO DITECTO	DELETE	1.1 1	TLF		Change Addition	
NAME		NDEZ. MARIO			1.2 N				
STREET ADDRESS	A 444 WALDEN BANG BLACE					1.3 STREET ADDRESS			
CITY-ST-ZIP					- 1	TY-SI			
TITLE	D			DELETE	2.1 TI			Change Addition	
NAME	FERNAL	NDEZ, VICKI			2.2 N	AME			
STREET ADDRESS	1429 W	ALDEN OAKS PLA	CE		2.3 ST	REET	ADDRESS		
CITY-ST-ZIP	PLANT	CITY FL 33566			2.40	ITY-S	T-ZIP		
TITLE				DELETE	3.1 71	TŁĒ		☐ Change ☐ Addition	
NAME					3.2 N	AME			
STREET ADDRESS					3.3 \$	rree1 .	ADDRESS		
CITY-ST-ZIP					_		T-ZIP		
TITLE				☐ DELETE	4.1 1/	TLE		L Change L Addition	
NAME					4. 2 N		ļ.		
STREET ADDRESS					1		ADDRESS		
CITY-ST-ZIP			_	OFFEE	_	TY-\$1	- ZIP	Dolona Dadilla	
TITLE				DELETE	5.1 Ti		1	Mange Addition	
NAME					5.2 N		4000EC2	//) /	
STREET ADORESS							ADDRESS		
CITY-ST-Z#P TITLE				DELETE	5.4 CI 6.1 Tr		1 - ZIP	Change	
NAME				- DETELLE	6.2 NA			5000025329 8 5***	
							ADDRESS	500002532985 Addition -05/22/9801024042	
STREET ADDRESS								***150.00	
CITY-ST-ZIP	nostifu that th	a information ourseling	Luith this films	door not qualify fo		TY-SI		Lio Saction 110 07/3(i) Florido Statutos I further cartify that the information	

med whith any living does not quarity for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information of convention and accurate and that my signature shall have the same legal effect as if made under oath; that I am an in the same in the indicated on this arm ral reproficer or director of the cogliblock 12 or Block 13 it chan