

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000004288

1. Corporation Name

RAVAS SEED COMPANY

Principal Place of Business

4739 N.W. 72ND AVENUE
MIAMI FL 33166

Mailing Address

4739 N.W. 72ND AVENUE
MIAMI FL 33166

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90228 025 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/14/1998

4. FEI Number

65-0805069

Applied For

Not Applicable

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 the current year Intangible
Personal Property Tax.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

RAMIREZ, HERNANDO V
4739 N.W. 72ND AVENUE
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
4725 NW 72 AVENUE

83

84 City
MIAMI

FL

85 Zip Code
33166

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

☐ DELETE

TITLE PD
NAME RAMIREZ, HERNANDO V
STREET ADDRESS 4739 N.W. 72ND AVENUE
CITY-ST-ZIP MIAMI FL 33166

TITLE VD
NAME DE VAZQUEZ, NUBIA O I
STREET ADDRESS 4739 N.W. 72ND AVENUE
CITY-ST-ZIP MIAMI FL 33166

TITLE SD
NAME RAMIREZ, JAVIER H
STREET ADDRESS 4739 N.W. 72ND AVENUE
CITY-ST-ZIP MIAMI FL 33166

TITLE TD
NAME RAMIREZ, FABIAN H
STREET ADDRESS 4739 N.W. 72ND AVENUE
CITY-ST-ZIP MIAMI FL 33166

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change

☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

VASQUEZ RAMIREZ, HERNANDO

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

CARDONA DE VASQUEZ, NUBIA I

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

VASQUEZ CARDONA, JAVIER H

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

VASQUEZ CARDONA, FABIAN H

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change

☐ 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HERNANDO VAZQUEZ RAMIREZ- PRES

04/22/99

Date

Daytime Phone #

CR2E034 (1/98)