**PROFIT** CORPORATION ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000097112

S. GARCIA HARVESTING, INC.

				•			
Principal Place of Business		Mailing Address					
371 SEMINOLE DR.		371 SEMINOLE DR.					
LANTANA FL 33462 LANTANA FL 33462				DO NOT WRITE IN THI	S SPACE		
					3. Date incorporated or Qualifed		٦
					11/16/1998		
2 Principal P	face of Business	2a. Mailing Address	<del></del>		4. FEI Number	Applied For	٦.,
_	iaca or Business	26			65-0682739	Not Applicable	] ;;
21 Suite, Apt.	# etc	Suite, Apt. #, etc.				\$8.75 Additional	1
22	W. 010.	27			5. Certificate of Status Desired	Fee Required	╛
City & Stat	er	City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	┙
Zip	Country	Zip	Country	,	8. This corporation owes the current year li		
24 =			30		Personal Property Tax.	Yes No	_
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registers	d Agent	-
			81	Name			1
:	ILAP, PATRICIA L	•	82	Street Addr	ress (P.O. Box Number is Not Acceptable)		1
	S. SEACREST BLVD.					<u> والمحدد و والمحدد و و والمحدد و و و</u>	4
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			84	City	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	85 Zip Code	1
				1 1	<u>, F</u>	L	
11. Pursuant	to the provisions of Sections 607.050.	2 and 607.1508, Florida S	atutes, the above	e named corp	poration submits this statement for the purpose on's board of directors. I hereby accept the appr	of changing its registered	1
office or r	egistered agent, or both, in the State of familiar with, and accept the obligation	of Florida. Such change w tions of Section 607.0505	es autnonzeo by , Florida Statutes	tne corporation.	on's board or directors. Thereby accept and app	AND TO	
_	,,, <u></u>				•		
SIGNATURE	Signature, typed or printed name of registered agen	t and little if applicable. ()	NOTE: Registered Agei	esupes erufangia tr	EATE (gratateries nertw be		ને જી
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS A		CR2E034 (11/98)
TTILE	CORPORATE OF	FICER DELET	E 1.1 πτ.Ε			☐ Change ☐ Addition	=
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STREET ADORESS		DRIVE	1.3 STREE	TADDRESS			🗒
CITY-ST-ZIP	LANTANA, FL.3	3460	1.4 CITY-S	17-2 <u>1</u> P		Change Addition	48
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NAME			2 2 NAME			-	ĺ
STREET ADDRESS			ZJ STREE	FADDRESS			-
CITY-ST-ZIP			2.4 CITY-5	57-ZIP			1
TITLE		☐ DELETI	3.1 TITLE				4
NAME			1 armice	i		☐ Change ☐ Addition	
STREET ADDRESS		,	32NAME			☐ Change ☐ Addition	
		, Determ	32NAME	T ADDRESS	A STATE OF THE STA	□ Change □ Addition	
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		•	32 NAME 33 STREE 34 CITY-5				
-TITLE	1	•	3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME				
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14. 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 aodress, with all other like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

AME OF SIGNING OFFICER OR DIRECTOR GARCIA

Jan 23, 1999 8:00 am Secretary of State

01-23-1999 90017 043 \*\*\*150.00