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

May 19 1997 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham, Secretary of State ANNUAL REPORT Socretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # \$56930 (8)PADRON'S PRODUCE, INC. Principal Place of Business Mailing Address 777 SW 9 AVE 777 SW 9 AVE MIAMI FL 83130 MIAMI FL 33130-3213 3. Date Incorporated or Qualified 3a. Date of Last Report 06/04/1991 05/01/1996 2a. Mailing Address 2. Principal Place of Business 4. Eff Number Applied For 65-031700 21 26 Not Applicable Sulto, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Bo 23 Trust Fund Contribution Added to Fees Zip Country 8. This corporation has liability for inlangible tax under s. 199.032 Yes 25 29 30 Florida Statutes ΠNo 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent PADRON, GUILLERMO 61 Name 777 SW 9 AVE Street Address (P.O. Box Number is Not Acceptable) 82 #308 **MIAMI FL 33130** 83 84 Zip Code 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of nigistered agent and title if applicable (NOTE: (registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)DELOTE TITLE 1.1 Till (E PADRON, GUILLERMO NAME 1.2 NAME 777 SW 9 AVE #308 STREET ADDRESS 1.3 STREET ADORESS MIAMI FL CITY-ST-ZIP 14 DHY-ST-7IP TITLE DELETE Change Addition 21 Intl PADRON, GUILLERMO NAME 2.2 KAM6 777 SW 8 AVE #308 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 C(1) - \$1 - 2(F) DILLETE Change TITLE Addition 3.1 1011 NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY - \$1 - 7/P Duri TITLE 411/11/ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 OHY-\$1-ZIP DELFTE TITLE 51 THLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.9 STREET ADDRESS CITY-ST-ZIP 5.4 CHY-S1-ZIP DELETE TITLE Change Addition 6.1 TITLE

62 NAME

6.3 STREET ADDRESS

14. I do 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 eath; that I am an officer or director of the corporation or the receiver or trustee compowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 is changed, or on an attachment with an address.

NAME

STREET ADDRESS

CITY-ST-ZIP

(300 854-8972

**FILED**