

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED) MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathiam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V36059 (6)

1. Corporate Name
QUEEN BERRIES, INC.



Principal Place of Business Mailing Address
**9045 LAFONTANA BLVD.
C68
BOCA RATON FL 33434**

2. Principal Place of Business 2a. Mailing Address
21. State, Apt. #, etc. 26. State, Apt. #, etc.
22. City & State 27. City & State
23. Zip 28. Zip
24. Country 29. Country

3. Date Incorporated or Qualified **05/14/1992** 3a. Date of Last Report **09/11/1995**
4. FEI Number **65-0360358** 4a. Appointed For ☐ Not Appointed
5. Certificate of Status Due ☐ **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**
8. Does corporation have a right to sue? ☒ Yes ☐ No
10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

**LAZANO, MANUEL JOSE
9045 LAFONTANA BLVD.
C68
BOCA RATON FL 33434**

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City **FL** 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent for both in the State of Florida. Such change was authorized by the corporation's board of directors. If entity does not appoint and accept the new agent, then it is in violation of the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Secretary of State or President or Vice President or Treasurer or Controller or any other officer or director of the corporation.

12. OFFICERS AND DIRECTORS

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13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

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14. I, the undersigned, certify that the information furnished on this report is true and correct to the best of my knowledge and belief, and that I am a duly qualified officer or director of the corporation and am authorized to execute this report as required by Chapter 617, Florida Statutes, and I am not aware of any material misstatements or omissions in this report.

SIGNATURE:

SIGNATURE (PRINTED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

MANUEL JOSE LAZANO 8/06/96

CR2E034 (3/96)