

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **V53028** (9)
1. Corporation Name
TAG'S PRIDE PRODUCE CORP.

Principal Place of Business
27535 W. MILLER RD.
DADE CITY FL 33525
US

Mailing Address
27535 W. MILLER ROAD
DADE CITY FL 33525
US

FILED

99 JAN 11 PM 12:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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DO NOT WRITE IN THIS SPACE--005

3. Date Incorporated or **07/24/1992**
Fees: **750.00** *****750.00**

4. FEI Number **59-3134537**
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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOHNSON, LEONARD H.
301 EAST MERIDIAN AVENUE
SUITE 314
DADE CITY FL 33525

81 Name **Leonard H. Johnson**
82 Street Address (P.O. Box Number is Not Acceptable)
37837 Meridian Ave., Suite 314
83
84 City **Dade City** FL 85 Zip Code **33525**

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 **Leonard H. Johnson**
Signature, typed or printed name of registered agent and title if applicable.

Leonard H. Johnson
(NOTE: Registered Agent signature required when reinstating)

1/3/98
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DP** ☐ DELETE
NAME **KRIG, HAROLD A., JR.**
STREET ADDRESS **27535 MILLER ROAD**
CITY-ST-ZIP **DADE CITY FL**

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

TITLE **D** ☐ DELETE
NAME **SPEIER, GARY J.**
STREET ADDRESS **533 WESTCHESTER AVE**
CITY-ST-ZIP **YONKERS NY**

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

TITLE **D** ☐ DELETE
NAME **SPINALE, ANTHONY**
STREET ADDRESS **B266 NYC TERMINAL MARKET**
CITY-ST-ZIP **BRONX NY**

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

TITLE **DST** ☐ DELETE
NAME **GREIF, EDWARD**
STREET ADDRESS **15606 LAKE IOLA ROAD**
CITY-ST-ZIP **DADE CITY FL**

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME **MICHAEL A. KRIG**
5.3 STREET ADDRESS **16108 COMPTON PALMS DR.**
5.4 CITY-ST-ZIP **TAMPA, FLA. 33647**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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.

SIGNATURE: **Michael A. Krig**

7-2-98 352588-2174

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