

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V66972** (3)
1. Corporation Name
GREEN ACRES FARM INC.



Principal Place of Business

**14949 NW 117TH AVE
MIAMI FL 33182
US**

Mailing Address

**6345 W 10 AVE
HIALEAH FL 33012**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

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Zip

Country

Zip

Country

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9. Name and Address of Current Registered Agent

**GONZALEZ, ANDRES
6345 W 10 AVE
HIALEAH FL 33012**

3. Date Incorporated or Qualified

09/24/1992

3a. Date of Last Report

04/13/1995

4. FEI Number

65-0370620

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

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 607.1508, 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 of person to be printed name of registered agent and title if applicable

DATE Registered Agent Signature Required When Recording

01-26-1996

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

**PD
GONZALEZ, ANDRES
6345 W 10 AVE
HIALEAH FL**

☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

**VD
GONZALEZ, ANDREW J., JR.
6345 W 10 AVE
HIALEAH FL**

☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

**STD
GONZALEZ, GISELA
6345 W 10 AVE
HIALEAH FL**

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE NAME STREET ADDRESS CITY-STATE-ZIP

2. TITLE NAME STREET ADDRESS CITY-STATE-ZIP

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30. TITLE NAME STREET ADDRESS CITY-STATE-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-26-1996 (305) 820-1335

DATE

TELEPHONE

CR2E034 (12/95)