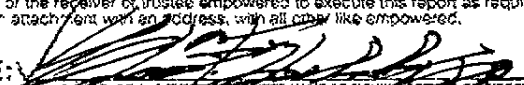


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # G27891		
1. Entity Name HEL-BENT TREE FARMS, INC.		
Principal Place of Business % CHARLES F. HELMLY, JR. 11100 SW 296 ST MIAMI, FL 33186 US		Mailing Address % CHARLES F. HELMLY, JR. 11985 S.W. 98 LANE MIAMI, FL 33186
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent HEMLY, CHARLES F JR 11985 SW 98 LANE MIAMI, FL 33186		 04302004 No Chg-P CR2E034 (10/03) 4. FEI Number 59-2234938 Applied For ☐ Not Applicable 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when renouncing) _____ DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HEMLY, CHARLES F., JR. 11985 S.W. 98 LANE MIAMI, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEMLY, LISA R 11985 SW 98 LANE MIAMI, FL 33186	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD HEMLY, MARIA P 11985 SW 98 LN MIAMI, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HEMLY, CHARLES F III 11985 SW 98 LANE MIAMI, FL 33186	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE:  Pres 4/28/04 (365) 279-4015 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		