2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

ATURE AND TOPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC

Feb 18, 2004 8:00 am **Secretary of State** DOCUMENT # P02000070167 1. Entity Name 02-18-2004 90026 042 ***150.00 SUNSTATE GRAIN BROKERS, INC. Principal Place of Business Mailing Address 21773 BRIXHAM RUN LOOP 21773 BRIXHAM RUN LOOP ESTERO FL 33928 ESTERO FL 33928 3. Mailing Address 2. Principal Place of Business 11433 Pembrookhun 11433 Pembrook Run Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) MOORE Applied For City & State City & State 4. FEI Number 75-3069403 多 Stero Not Applicable Estero Country Country \$8.75 Additional 5. Certificate of Status Desired Lee Fee Required Lee 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CAME, PRESTON C Street Address (P.O. Box Number is Not Acceptable) 21773 BRIXHAM RUN LOOP ESTERO FL 33928 City Zip Code 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. Mira d name of registered agent and title if applicable. FILE NOW!!!" FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. Addition TITLE ☐ Delete TITLE CAME, CHERIE J NAME NAME 11433 Pembrook Run STREET ADDRESS 21773 BRIXHAM RUN LOOP STREET ADDRESS CITY-ST-ZIP ESTERO FL 33928 CITY-ST-7IP EStero, FL 33928 ☐ Delete Cenange ■ Addition TITLE CAME, PRESTON C 11433 Pembrook Run NAME NAME STREET ADDRESS 21773 BRIXHAM RUN LOOP STREET ADDRESS ESTERO, FL 33928 CITY-ST-ZIP ESTERO FL 33928 CITY-ST-7IP Change ☐ Addition ☐ Delete NAME - NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

FILED