2004 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Apr 23, 2004 08:00 AM Secretary of State **DOCUMENT # 007130** 1. Entity Name PEARSON AGRICULTURAL, INC. Principal Place of Business Mailing Address 16120 N NEBRASKA AVE 16120 N NEBRASKA AVE LUTZ, FL 33549 US LUTZ, FL 33549 04202004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-0255070 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE PEARSON, R.V., JR. 16120 N NEBRASKA AVE LUTZ, FL 33549 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 U00000126559 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PSTD TITLE PEARSON, R. V JR. NAME STREET ADDRESS 16120 N. NEBRASKA AVE. CITY-ST-ZIP LUTZ, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITI E NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CiTY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling 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 supplieriental 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:

STREET ADDRESS CITY-ST-ZIP