FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED	
Feb 20 1998 8:00am]
Secretary of State	

'	MENT # 266835 WAY FARMS, INC.				I ADDINE HOLE DIVID BUILT HEIDE HIED BUIL DIVID DIV	III ANN): ANNII ANNII ENRII IRNI
Principal Place of Business 10190 BROAD ST BROOKSVILLE FL 34601		Mailing Address 2611 BAYSHORE BLVD #903 TAMPA FL 33629 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
21 Suite, Apt	lace of Business	2a, Mailing Address 26 Suite, Apt. #, etc.			02/05/1963 4. FEI Number 59-1033030 5. Certificate of Status Desired	Applied For Not Applicable \$8.75 Additional
City & State 23 Zip	Country	City & State 28 Zip	Country		8. Election Campaign Financing Trust Fund Contribution 9. This corporation owes or has paid the co	
24 25 29 30 §. Name and Address of Current Registered Agent PILA, SALOMON 2611 BAYSHORE BLVD., #903 TAMPA FL 33609				Name Street Add	Personal Property Tax due June 30. 10. Name and Address of New Registered ress (P.O. Box Number is Not Acceptable)	I Agent 85 Zip Code
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable (NOT	tes, the above-nauthorized by thorida Statutes. E. Registered Agent si		poration submits this statement for the purpose tion's board of directors. I hereby accept the approach when reinstating) DATE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PILA, SALOMON 2611 BAYSHORE BLVD, #903 TAMPA FL	☐ DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12 Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PILA, HERTA 2611 BAYSHORE BLVD. #903 TAMPA FL	☐ DELET E	2.1 TITLE 2.2 NAME 2.3 STREET ADD 2. 4 CITY-ST-Z	DRESS		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T REIBER, SAM I 907 S. STERLING TAMPA FL	DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZI	PRESS		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PILA, KALMAN W 14011 SCHADY SCHORES DR TAMPA FL	□ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADD 4.4 CITY - ST - ZIE	RESS		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADD 5.4 CITY-ST-ZIF	RESS		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	netify that the interception purplied will	□ DELET E	6.1 TITLE 6.2 NAME 6.3 STREET ADDI 6.4 CITY - ST - ZE	RESS		Change Addition

4. 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.

OLONIATURE.

DOLL (HERTA DIIA) 1/2

2/4/

CR2E034 (10/97