

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

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Mar 22, 1999 8:00 am
Secretary of State

03-22-1999 90088 044 ***150.00

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PROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 277242

1. Corporation Name
W & D DAIRY INC

Principal Place of Business
7505 W TAFT ST
WEST HOLLYWOOD FL 33024

Mailing Address
7505 W TAFT ST
WEST HOLLYWOOD FL 33024



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/07/1964

4. FEI Number
59-1031100 Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business
21 8050 NW 30th St
Suite, Apt. #, etc.

2a. Mailing Address
26 8050 NW 30th St
Suite, Apt. #, etc.

23 City & State
Hollywood FL

28 City & State
Hollywood, FL

24 Zip
33024

29 Zip
33024

25 Country
Broward

30 Country
Broward

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARNETT, RITA C
911 N 73 AVE
HOLLYWOOD FL 33024

81 Name
Allan Pedro Garcia
82 Street Address (P.O. Box Number is Not Acceptable)
8050 NW 30th Street
83
84 City
Hollywood FL 85 Zip Code
33024

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 *Ally P. Jensen*

DATE 3/18/99

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		
TITLE	VT	<input type="checkbox"/> DELETE
NAME	DETJEN, JEWELL	
STREET ADDRESS	7505 TAFT STREET	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	BARNETT, RITA	
STREET ADDRESS	911 N 73RD AVE	
CITY-ST-ZIP	HOLLYWOOD, FL 00000	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Jewell O. Pollett	
1.3 STREET ADDRESS	8050 NW 30th Street	
1.4 CITY-ST-ZIP	Hollywood FL 33024	
2.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Allan Pedro Garcia	
2.3 STREET ADDRESS	8050 NW 30th St	
2.4 CITY-ST-ZIP	Hollywood, FL 33024	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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, with all other like empowered.

SIGNATURE: *Ally P. Jensen*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE 3/18/99
DAYTIME PHONE # 954 704-1666

CR2E034 (11/98)