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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 292132

Principal Place of Business

(8)

Mailing Address

RANCHLAND INC

2838 N W 22ND AVE MIAMI FL 33265-0474		P.O. BOX 650474 MIAMI FL 33265-0474 US						
				3. Date Incorporated or Qualified 3a. Date of Last Report 04/20/1965 06/07/1996			leport	
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		I Ar	pplied For
1		26			59-1648328			ol Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	B	City & State			Election Campaign Financing Trust Fund Contribution			May Be to Fees
Z (p	Country	Zip	Cou	intry	8. This corporation has liability for i	ntangible t	ax under s	199.032,
4	25	29	30				No	
	9, Name and Address of Curren	t Registered Agent		04) 1	10. Name and Address of New Re	gistered A	gent	
	NES, BUDDY			81 Name				
	8 NW 22ND AVE			82 Street Add	dress (P.O. Box Number is Not Acceptab	le)	***************************************	
MIA	MI FL 33142	•		83				
				93				
				B4 City		FL		Code
1. Pursuant	to the provisions of Sections 607,050	2 and 607.1508, Florida Statu	tes, the a	bove-named co	rporation submits this statement for the p	urpose of (changing i	ts registered
agent. La	egistered agent, or both, in the State m familiar with, and accept the obliga	or Fiorida, Such change was ations of, Section 607.0505, F	autnorize Iorida Sta	a by the corpori lutes.	ation's board of directors. I hereby accep	it the appo	iniment as	regisiereo
SIGNATURE.	Signature, typed or printed name of registered age	or and title dispolicable (NO	7F : Ragistere	d Anent singshure ten	uired when reinstating)	DATE		
12.	OFFICERS AND		13.	o rigorit algriculus req	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	1S IN 12
ITLE	PD	☐ DELETE	1.1 T	TLE			Change	Addition
NAME	BYRNE,ESTHER MORRIS		1.2 N	AME				
STREET ADDRESS	2838 N.W. 22ND AVE.		1.3 \$	TREET ADDRESS				
DITY-ST-ZIP	MIAMI FL		1.40	TY-ST-ZIP				
TITLE	D	☐ DELETE	2.1 TI	TLE			Change	Addition
VAME	Morriss,Phillip		2.2 N	AME	•		-	
STREET ADDRESS	2838 N.W. 22ND AVE.		2.3 \$	TREET ADDRESS				
CITY-ST-ZIP	MIAMI FL		2.40	CITY-ST-ZIP				
TITLE	D	DELETE	3.1 7	TLE			Change	Addition
NAME	Byrne,Buddy		3.2 N	AME				
STREET ADDRESS	2838 N.W. 22ND AVE.		3.3 S	TREET ADDRESS				
DITY-ST-ZIP	MIAMI FL		3.4. 0	CITY-ST-ZIP				
TITLE		☐ DELETE	4.1 T	TLE			Change	Addition
NAME			4.21	lame				
STREET AODRESS			4.3 \$	TREET ADDRESS				
CITY-ST-ZIP			4.4 0	ITY+ST-ZIP			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
TITLE		☐ DELETE	5.1 T	TLE			Change	Addition
NAME			5.2 N	AME				
STREET ADDRESS			5.3 S	TREET ADDRESS				
CITY-ST-ZIP			5.4 C	ITY-S1-ZIP				
TITLE		☐ DELETE	6.1 T	. 1	•		Change	Addition
NAME			6.2 N	AME				
STREET ADDRESS			6.3 S	TREET ADDRESS				
City-\$1- <i>2</i> ip				ITY-ST-ZIP				
					ed in Section 119.07(3)(i), Florida Statute lat my signature shall have the same lega			
I am an o		the receiver or trustee empo	wered to		ort as required by Chapter 607, Florida S			