2004 FOR PROFIT CORPORATION ANNUAL REPORT

Aug 05, 2004 8:00 am Secretary of State **DOCUMENT # 292132** -08-05-2004 90068 001 ***155.00 1. Entity Name 08-05-2004 90068 002 *****8.75 RANCHLAND INC Principal Place of Business Mailing Address 56431434 2838 N W 22ND AVE MIAMI, FL 33265-0474 P.O. BOX 650474 MIAMI, FL 33265-0474 US 2. Principal Place of Business 1201/SWJTHST 3. Mailing Address /20// SW-8-TH-ST Suite, Apt. #, etc. Suite, Apt. #, etc. 07272004 Chg-P CR2E034 (10/03) City & State MIAM! FLA City & State MIAMI FLA 4. FEI Number Applied For 59-1648328 Not Applicable \$8.75 Additional 5. Certificate of Status Desired MIAM DADE _ 33184 MIAM_BADE Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ESTHER M BYRNE ERISIDENT OR BYRNES.BUDDY BURNE, ESTHER Street Address (P.O. BOX NUMBERS SECRETARY) TREASURER 2838 NW 22MD AVE MAMI, FL 33142 12011 SW 75T City MIAMI FL 33184 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE ☐ Delete TITLE PRESIDENT BYRNE, ESTHER MORRIS NAME NAME STREET ADDRESS STREET ADDRESS 12011 SW 7 ST CITY-ST-ZIP MIAMI.FL City-St-ZiP TITLE Delete TITLE VICE PRESIDENT Change Addition MORRISS.PHILLIP NAME NAME 2838 N.W. 22ND AVE. 12011 SW 75 MIA FL STREET ADDRESS STREET ADDRESS MIAMI, FL CITY-ST-7/P CITY-ST-7IP TITLE TITLE ☐ Change noitionA [SEC TREASURER BYRNE, BUDD NAME 2838 N.W. 22ND AVE STREET ADDRESS STREET ADDRESS 12011 SW 757 MIA FL MIAMI, FL CITY-ST-ZIP CITY-ST-ZIP THLE ☐ Delete TITLE ☐ Change Addition NAME MANIE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-SI-ZIP 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 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

FILED

SECTAES 305 221 83318

TO NOW OME IT MAY CONCERN, # 292 132 MU WIFE ESTHER M BYANE PRESIDENT OF OUR CORP RANCHLAND INC. HAS BEEN IN 2 HOSPITALS STRAITMIN THE LAST BO DAYS AND I HAVE NOT LEFT HER SIDE NIGHT + DAY FOR ALL THAT TIME. I DID NOT RECEIVE ANY CORP PAPERS UNTIL I CALLED KNOWING CORP PAPERS WERE SOME TIME DUE, 1

I AM SORRY WE WERE LATE BUT THERE WAS NOTHING I COULD DO, IST TIME IN OVER 30 YEAR

> SINCERLY BUDDY BYRNE SEC, TRES. RANCHIAND INC