## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Aug 18, 2005 8:00 am Secretary of State

DOCUI 1. Entity Nam RANCHL		132		1		08-18-2005 90002 007 ***15			
Principal Place of Business 12011 SW 8TH STREET MIAMI, FL 33184			Mailing Address P.O. BOX 650474 MAMI, FL 33265-9474 US			500622 <b>44</b>			
2. Principal Place of Business 778 5T Suite, Apt. #, etc.			3. Mailing Address 774ST Suite, Apt. #, etc.			_			
						<b>4.</b> FEI Numbe	Chg-P	CR2E034 (10/03)	oplied For
City & State MI FL.			City & State M   FL			59-164		No	ot Applicable
Zip 331			33184	Sur.	SA		of Status Desired	S8.75 Add Fee Require	
6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name BUDDY BYRNE									
-BYRNES;BUDDY					Street Address (P.D. Box burn) by regret Post entage)				
MIAMI, FL 33184 NO-S					120,	// \su	/ 21		
		City 17/1		City MIA	MI	<u></u>	FL 339	84	
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.									
CRudaly Roseral									
SIGNATURE Signature. Noted or printed name in registered agent and talle if applicable (NOTE: Registered Agent separature required when reinstating)  DATE									
FILE NOW!!! FEE IS \$550.00  Due by September 7, 2005  9. Election Campaign Financing Trust Fund Contribution.						.00 May Be ded to Fees			
10.	P	FFICERS AND DI	RECTORS 11.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
NAME	BYRNE, ESTHER MORRIS		NAM		E			[] Change	L ADDITION
STREET ADDRESS	12011 SW 7 STREE   MIAMI, FL 33184			ET ADDRESS -ST-2IP					
TOE .	VP		☐ Delete TITL					☐ Change	Addition
OTHEN ADDRESS	MORRISS,PHILLIP 12011 SW 7 STREE	NAME STREE		ET ADDRESS					
CITZI-ZIP	MIAMI, FL 33184		СПХ	- ST - ZIP					
E S	P BYRNE,BUDDY	Delete TITLE		į			☐ Change	Addition	
STITLE A APPLESS	12011 SW 7 STREE			ET ADDRESS					
THE L. P	MIAMI, FL 33184		☐ Delete	TITL	- ST-ZIP		<del></del>	Change	Addition
NAME OF THE PROPERTY OF				NAM	- 1				
CITY-ST-ZIP					ET ADDRESS -ST-ZIP				
TITLE			☐ Delete	THTU	ţ			☐ Change	☐ Addition
NAME STREET ADDRESS				NAM STRE	ET ADDRESS				
CITY-ST-ZIP				ÇITY	- ST - ZIP				
NAME			☐ Delete	TITLI NAM	;			☐ Change	Addition
STREET ADDRESS	STREET ADDRESS CITY-ST-ZIP				ET ADDRESS - ST - ZIP				ļ
12. I hereby d	Lentify that the information	n supplied with th	is filing does not qualify	y for the exe	mption stated in Se	ection 119.07(3)(	i), Florida Statutes.	I further certify that the in	nformation
indicated of the cor	on this report or supple	mental report is tri or trustee empow	ue and accurate and the ered to execute this rea	at my signa oort as requi	ture shall have the	same legal effect	t as if made under	oath; that I am an officer ne appears in Block 10 of	or director

FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 2, 2005

RANCHLAND INC C/O BYRNE 12011 SW / STREET MIAMI, FL (33184

SUBJECT: RANCHLAND INC Ref. Number: 292132

Please be advised, we have received your annual report/uniform business report; however, the report has not been filed and a copy is being returned for the following correction(s):

The fee to file the profit annual report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

An officer or director must sign the report.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Tyrone Scott Document Specialist

Letter Number: 305A00049837



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