## 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** Jan 22 1998 8:00am Secretary of State

1. Corporation	IVIEIN I in Name	# 297	695	(9)								
H. SIM	S FARMS	. INC.										
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Principal Place of Business Mailing Address								]	IID EDITE BABIT BITED IDERE		IN MINNI MINEL MININ	44831 14833
1506 1ST ST SW 1506 1ST ST SW												
P.O. BOX 516				P.O. BOX 518				DO NOT WRITE IN THIS SPACE				
RUSKIN FL 3	33/0		HUSK	RUSKIN FL 33570				3. Date Incorporated or Qualified				
								10/14/1		-		
2. Principal F	lace of Busin	ness	2a. Ma	2a. Mailing Address				4. FEI Numb			Ар	plied For
21			26	<del></del>				59-110	7614		No	t Applicable
Suite, Apt.	#, etc.		<del> </del> 1	Suite, Apt. #, etc.				5. Certificate	of Status Desired		\$8.75	
22 City & Cycl	· · · · · · · · · · · · · · · · · · ·		27	City & State							Fee Re	<del>``</del>
City & Stat	.8		— <u> </u>	<u> </u>					ampaign Financing. I Contribution		<b>\$5.00</b> Added t	
Zip	Country									n owes or has paid the current year Intangible		
24		25 29			30			Personal Property Tax due June 30. Yes No				
9. Name and Address of Current Registered Agent									Address of New I		d Agent	
SIMS, MELVIN H.							,					
2202 18TH AVE, SE					}	82 Street Address			mber is Not Accept	able)		·
RU	SKIN FL 33	1570			ļ		14	M AVE. S	mber is Not Accept	·-·		
						83						
					ŀ	84 City					85 Zip (	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the							4		in alabasa at fau tha	FI		
office or r agent. I a	registered ag Im <mark>fam</mark> iliar wi	ent, <b>or b</b> oth, in t ith, <b>and a</b> ccept t	he State of Florida. S he obligations of, Se	Such change was ection 607.0505, F	authorized Torida Statu	by the cor les.	rporatio	on's board of dire	ectors. I hereby acc	ept the ap	or changing is opointment as	registered
SIGNATURE		· ·										
12.	Signature, typed		pistered agent and title if app ERS AND DIRECTO		13.	Agent signatur	e rednited	d when reinstaling)	/CHANGES TO OFF	DATE.	ID DIRECTOR	S IN 12
TITLE	D	01110	ENG AND BINEOTO	DELETE	1.1 ][]	E	D				Change	Addition
NAME	SIMS, MELVIN H.			1.2 NA			Su	MS. MEL	ring H.		,	
STREET ADDRESS 2202 18TH AVE S.E.				1.3 \$1			4-1	SIMS, MELVIN H. 417 14 TH AVE S.E. RUSKIN, FL 33570				
CITY-ST-ZIP	RUSKIN					Y-ST-ZIP	R	JUSKIN F	_ 33570			
TITLE	TS			DELETE	2 1 117		1				Change	Addition
NAME	SIMS,LL	OYD L			2.2 NAI	ME						
STREET ADDRESS		RNER 5TH AV	E. 2 AV	£ 2.3 \$								
CITY-ST-ZIP	RUSKIN	FL					2. 4 CITY - ST - ZIP		,	_		
TITLE				DELETE	3.1 T(T	.£					☐ Change	Addition
NAME					3.2 NAI	AE .						
STREET ADDRESS					33516	EET ADDRESS						
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TITLE				☐ DELETE	4.1 1/11						L Change	☐ Addition
NAME !					4. 2 NA							
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CITY-ST-ZIP				DELETE		r-ST-ZIP					Change	Addition
TITLE				□ vere te	5 1 TITL		1				FT CHAIRE	Mudilloli
NAME STOCKE ADDRESS					5.2 NAM							
STREET ADDRESS						EET ADDRESS	1					1
CITY-ST-ZIP TITLE		·		DELETE	5.4 CH	r-ST-7(P	ļ				Change	Addition
NAME					6.2 NAM		1				\$mange	
STREET ADDRESS						EFT ADDRESS	1					İ
•						-SI-ZIP						]
44 16			6 1 20 0 1 60		0.4 011	OF ER	<u>ــــــــــــــــــــــــــــــــــــ</u>	140.05(0)	CA Francisco De A A			

Thereby certify that the information supplied with this filing closs 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.