

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # 502244 (7)**  
1. Corporation Name  
**MABAR FARMS, INC.**



Principal Place of Business Mailing Address  
**6500 NW 118TH ST RD  
REDDICK FL 32686** **6500 NW 118TH ST RD  
REDDICK FL 32686**

3. Date Incorporated or Qualified **04/30/1976** 3a. Date of Last Report **02/08/1995**  
4. FEI Number **59-1671611** 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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address **2500 S. OCEAN BLVD** **2500 S. OCEAN BLVD.**  
Suite, Apt. #, etc. **APT 1-C-3** Suite, Apt. #, etc. **APT 1-C-3**  
City & State **PALM BEACH, FL** City & State **PALM BEACH, FL**  
Zip **33480** Country **U.S.A.** Zip **33480** Country **U.S.A.**

9. Name and Address of Current Registered Agent  
**LEAF, LINDA  
6500 NW 118TH ST RD  
REDDICK FL 32686**

10. Name and Address of New Registered Agent  
81 Name **HARRY KATZ**  
82 Street Address (P.O. Box Number is Not Acceptable) **2500 S. OCEAN BLVD**  
83 **APT 1-C-3**  
84 City **PALM BEACH** FL 85 Zip Code **33480**

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 **Harry Katz, HARRY KATZ, PRESIDENT** **July 23, 1996**  
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS  
TITLE ☐ DELETE  
NAME **PD KATZ, HARRY**  
STREET ADDRESS **2500 S. OCEAN BLVD.**  
CITY - ST - ZIP **PALM BEACH FL**  
TITLE ☐ DELETE  
NAME **STD KATZ, MABEL**  
STREET ADDRESS **2500 S. OCEAN BLVD.**  
CITY - ST - ZIP **PALM BEACH FL**  
TITLE ☐ DELETE  
NAME **VDS PEARLMAN, BARBARA K.**  
STREET ADDRESS **21 LINDEN AVENUE**  
CITY - ST - ZIP **WILMETTE FL**  
TITLE ☐ DELETE  
NAME **AT PEARLMAN, BARBARA K.**  
STREET ADDRESS **21 LINDEN AVENUE**  
CITY - ST - ZIP **WILMETTE FL**  
TITLE ☐ DELETE  
NAME **AST LEAF, LINDA**  
STREET ADDRESS **6500 NW 118TH ST RD**  
CITY - ST - ZIP **REDDICK FL**  
TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP  
2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP  
3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP  
4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP  
5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP  
6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Harry Katz, HARRY KATZ, PRESIDENT** **July 23, 1996** **561/582-0076**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (3/96)