SECOND NOTICE; CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/08: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998

SOUTHERN BEAN FARMS, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #
1. Corporation Name

(3)

FILED Aug 26 1998 8:00am Secretary of State



| Principal Place of Business 2150 S.W. 24 STREET HOMESTEAD Ft. 30381 | | | | | | | | |
|--|---|--|---|--------------|---|---|---|--|
| ## DO NOT WRITE IN THIS SPACE 2. Primopal Piaco of Businoss 2. Mailing Address 3. Data incorporated or Osalified O7/21/1977 Applied For Not Applicable Suits, Aprl. #, etc. Suits, Aprl | Principal Place of Business Mailing Address | | | | <u></u> | | 81884 BIRI BIRIK BIRIK 81811 BIRIK BIRIK BIRIK 18811 1891 | |
| 2. Principal Pinco of Businoss 2. Mailing Additions 2. 2. Mailing Additions 3. State 3. Clay & State 3. Clay & State 3. Clay & State 4. Election Campaign Financing 5. 5. Off May 8 clay 8. This corporation was not here paid the current year International Addition 4. Mailing Additions 4. Mailing | | | | | | | | |
| Principal Place of Business 2a Melling Address 4. FER Number Applied For Not Applicable 12a Not Applicable 12b Not Ap | | | | | | | | |
| 2. Principal Pisco of Business 2. Mailing Address 4. FEI Number Applied For | | | | | | | eo | |
| SUB, Apl. #, etc. 25 | 2. Principal Pla | ce of Business | 2. Mailing Address | | | | Applied For | |
| Solite, April P. etc. Solite | ¬ ′ | | F | | | | F1 | |
| Country State St | | | | | | | | |
| 20 20 20 20 20 20 20 20 | 22 | | 27 | 27 | | 5. Certificate of Status Desired | | |
| Zip | City & State | | City & State | City & State | | 6. Election Campaign Financin | \$5.00 May Be | |
| 25 79 36 Personal Property Tax due June 30. 27 to | 23 | | 28 | 28 | | Trust Fund Contribution | Added to Fees | |
| Page 20 | | Country Zip Cou | | | itry | | | |
| HAYES, CHAPLES A. 92 N. KROME AVE. HOMESTEAD FL 33030 11. Pursuant of the Provision of Sections 607 0502 and 601 1600 Try Ds. Syntus. The above-named corporation should directors. I hereby accept the appointment as registered agesty or both, in the State of Fig. 32. Such prings was submitted by the corporation's board of directors. I hereby accept the appointment as registered agent. I an (annilly-vivil): and accept sheep obligations is noted to 2000, Florida Statutes. SIGNATURE 12. FFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 12. FFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 12. FOR STREET ADDRESS CHANGES CHANGES 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 12. FOR STREET ADDRESS CHANGES CHANGES 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 14. CONSTILED 15. STREET ADDRESS CHANGES CHANGES STREET 15. STREET ADDRESS CHANGES CHANGES STREET CHANGES STREET ADDRESS STREET ADDRESS CHANGES CHANGES STREET ADDRESS STREET STREET ADDRESS STREET | 24 | | | 30 | | | · · · · · · · · · · · · · · · · · · · | |
| ## PARTS OF A PARTIES A PART OF THE PARTS OF | 1147 | | int Registered Agent | | 81 Name | | Registered Agent | |
| HOMESTEAD FL 33030 Committee Committe | | | | L | Johnny Eaker | | | |
| Same Home stead FL 33031 | | | | 1 | 82 Street Address (P.O. Box Number is Not Acceptable) | | etable) | |
| 11. Pursuant of Proprovision of sections 697 0502 and 507 1502 and 507 | HOME | SIEND FL SSUSU | | - | 83 | | | |
| 11. Pursuant Neorovision Size S | | | _ . | | | stead, FL | | |
| 11. Pursuant interprovisions/of sections 697 0502 and 697_1566 = mpo | | 4 | | | | c+aad | | |
| SIGNATURE Signature As for victed above of regulated agent and bits if applicable worth Regulated Agent signature required when remaining) 12. | 11. Pursuant t | the provisions of sections 607.05 | 02 and 607 1508, Plotos Statute | s, the abo | ve-named corp | oration submits this statement for the | 33031 | |
| SIGNATURE Signature As for victed above of regulated agent and bits of applicable TITLE PVS EAKER, JOHNNY SIRRET ADDRESS CITYST-ZIP TITLE STREET ADDRESS CITYST-ZIP TITLE MAME STREET ADDRESS | office or re agent. I ar | gistered agerly, or both, in the State familiar with and accept the obline | te of Florida. Such a lange was a nations of section 607 (505, Fig. | uthorized | by the corporat | tion's board of directors. I hereby acc | ept the appointment as registered | |
| Suprature Act of Visited Bigword or Implanted against and other if application Proff Registered Against signature required when nametating) DATE | | W < M | Cehn | | | • | 8-15-98 | |
| DELETE | | | | | d Agent signature re | | 07172 | |
| NAME STREET ADDRESS 21500 S.W. 264 STREET 1.3 STREET ADDRESS 1 | | | | | | ADDITIONS/CHANGES TO C | FFICERS AND DIRECTORS IN 12 | |
| STREET ADDRESS 2150\$ S.W. 284 STREET | | | L DELETE | | j | | Change Addition | |
| CITY-ST-ZIP | | | | | ĺ | | | |
| DELETE DELETE 2.1 T/TILE DELETE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 C-TY-ST-ZIP Change Addition Add | | | | | | | | |
| NAME | | UNMEDIEWN LF | | | | | | |
| STREET ADDRESS 23 STREET ADDRESS 24 CITY-ST-ZIP 24 CITY-ST-ZIP 24 CITY-ST-ZIP 24 CITY-ST-ZIP 25 CITY-ST-ZIP 25 CITY-ST-ZIP 25 CITY-ST-ZIP 26 CITY-ST-ZIP 27 CITY-ST-ZIP 2 | | DELETE | | | | | Change L_ Addition | |
| CITY-S1-ZIP | | | | | | | | |
| TITLE | | | | | | | | |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE A1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE S1 TITLE S1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE S1 STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS | TITLE | | DELETE | | | | Change Addition | |
| STREET ADDRESS STRE | NAME | | L.J OECETE | 3.2 NAN | IE | | Change C Addition | |
| STREET ADDRESS STRE | STREET ADDRESS | | | | | | | |
| NAME | CITY-ST-ZIP | | | 3.4 CITY | -ST-ZIP | | | |
| NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS | TITLE | | DELETE | 4.1 T(TL | E | | Change Addition | |
| A CITY-ST-ZIP | NAME | , | | 4.2 NAA | E | | | |
| TITLE DELETE 51 TITLE Change Addition NAME 52 NAME 53 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP Change Addition NAME DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS | STREET ADDRESS | | | 4.3 STR | EET ADDRESS | | | |
| NAME 52 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE DELETE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS | CITY-ST-ZIP | | | 4.4 CITY | -ST-ZIP | | | |
| STREET ADDRESS | TITLE | | DELETE | 5.1 TITL | E | | Change Addition | |
| CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS | NAME | | | 5.2 NAM | E | | | |
| TITLE DELETE 6.1 TITLE Change Addition NAME STREET ADDRESS 6.2 NAME 6.3 STREET ADDRESS | STREET ADDRESS | | | 5.3 STR | EET ADDRESS | | | |
| NAME STREET ADDRESS 6.2 NAME 6.3 STREET ADDRESS | CITY-ST-ZIP | | | | | | | |
| STREET ADDRESS 6.3 STREET ADDRESS | TITLE | | DELETE | 1 | | | Change Addition | |
| | NAME | | | | | | | |
| CITY-ST-ZIP ■64 CITY-ST-ZIP | STREET ADDRESS | | | | | | | |
| 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i). Florida Statutes. I further certify that the information | CITY-ST-ZIP | ify that the information supplied wit | th this filing does not qualify for th | | | ction 119 07/3)(i) Florida Statutes 1.6 | uther certify that the information | |

indicated on this annual report of suppliemental annual report