SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham *

Secretary of State DIVISION OF CORPORATIONS

G98646

(4)

FILED Aug 20 1998 8:00am Secretary of State

	AGRICULTURE, INC.						
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Dain sized Disc	of Punis	64-0: A-44				-{	
Principal Place of Business Mailing Address							
1875 N.W. 79TH STREET							
	Λ	2				DO NOT WRITE IN TH	IS SPACE
	V	19				3. Date Incorporated or Qualified	
2 Principal P	Place of Business	2a. Malling Address			· · · · · · · · · · · · · · · · · · ·	02/17/1984 4. FEI Number	Applied For
21 /// / 26						59-1990661	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional
22		/ 27				5. Certificate of Status Desired	Fee Required
<u> </u>	City & State					6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Co	untry		8. This corporation owes or has paid the contribution	Added to Fees
24	25	29	30			Personal Property Tax due June 30.	Yes No
	9. Name and Address of Currer					10. Name and Address of New Registere	d Agent
	APBELL, WINSTON			81	Name		
	5 N.W. 79TH STREET			82	Street Addre	ss (P.O. Box Number is Not Acceptable)	
MIAI	MI FL 33147					· · · · · · · · · · · · · · · · · · ·	
				83			
	•			84	City	F	85 Zip Code
11. Pursuan	it to the provisions of sections 607.050:	2 and 607.1508. Florida Statute	es. the at	LLL. bove-n	named corpora		
11. Pursuant to the provisions of sections 607.0502 and 607.1508, Fiorida 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			0,100 010	2101001			
L	Signature, typed or printed name of registered ager				ent signature requir	red when reinstating) DATE	
12.		ID DIRECTORS	13.		γ	ADDITIONS/CHANGES TO OFFICERS	
TITLE NAME	OALDON LINGSTON			1.1 TITLE 1.2 NAME			Change Addition
STREET ADDRESS	1875 N.W. 79TH STREET			NAME STREET A	DDDEEC		i C
OINEEL ADDRESS	I TOTALLETTE LATER ATTEMPT						1
CITY-ST-ZIP	MIAMI FL				i		1 1 6
CITY-ST-ZIP	MIAMI FL STD	DELETE		CITY-ST-Z	i		Change Addition
·		DELETE	- 1.4 C 2.1 T	CITY-ST-Z	i	. < ;	Change Addition
TITLE	STD CAMPBELL, JOE 1875 N.W. 79TH STREET	DELETE .	- 1.4 C 2.1 T 2.2 N	CITY-ST-Z	ZIP .	.4:	Change Addition
TITLE	STD CAMPBELL, JOE	DELETE .	1.4 C 2.1 T 2.2 N 2.3 S	CITY-ST-Z TITLE NAME	DDRESS	, 4:	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	STD CAMPBELL, JOE 1875 N.W. 79TH STREET	DELETE	1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 C 3.1 Ti	CITY-ST-Z TITLE NAME STREET A CITY-ST-Z TITLE	DDRESS	. • • • • • • • • • • • • • • • • • • •	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	STD CAMPBELL, JOE 1875 N.W. 79TH STREET		1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 C 3.1 Ti 3.2 N	CITY-ST-Z TITLE NAME STREET AT CITY-ST-Z TITLE NAME	PIP	. *:	- 13;
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	STD CAMPBELL, JOE 1875 N.W. 79TH STREET		1.4 C 2.1 Tl 2.2 N 2.3 S 2.4 C 3.1 Tl 3.2 N 3.3 S	CITY-ST-Z HITLE NAME STREET AI CITY-ST-Z HITLE NAME STREET AI	DDRESS DDRESS	, 4 ;	- 13;
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	STD CAMPBELL, JOE 1875 N.W. 79TH STREET	DELETE	1.4 C 2.1 Tl 2.2 N 2.3 S 2.4 C 3.1 Tl 3.2 N 3.3 S	CITY-ST-Z HTLE NAME STREET AL CITY-ST-Z HTLE NAME STREET AL CITY-ST-Z	DDRESS DDRESS		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD CAMPBELL, JOE 1875 N.W. 79TH STREET		1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 C 3.1 Ti 3.2 N 3.3 S 3.4 C 4.1 Ti	CITY-ST-Z HTLE NAME STREET AL CITY-ST-Z HTLE NAME STREET AL CITY-ST-Z	DDRESS DDRESS	.4:	- 13;
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	STD CAMPBELL, JOE 1875 N.W. 79TH STREET	DELETE	-1.4 C 2.1 Tl 2.2 N 2.3 S' 2.4 C 3.1 Tl 3.2 N 3.3 S' 3.4 C 4.1 Tl	CITY-ST-Z IITLE NAME STREET AI CITY-ST-Z IITLE NAME STREET AI CITY-ST-Z IITLE	DDRESS DDRESS	. 4 ;	Change Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	STD CAMPBELL, JOE 1875 N.W. 79TH STREET	DELETE DELETE	-1.4 C 2.1 Tl 2.2 N 2.3 S' 2.4 C 3.1 Tl 3.2 N 3.3 S' 3.4 C 4.1 Tl 4.2 N 4.3 Sl 4.4 C 5.1 Tl 5.2 N 5.3 Sl 5.4 Cl 6.1 Tl 6.2 N	CITY-ST-Z ITTLE IAME ITTLE IAME ITTLE IAME ITTLE IAME	DDRESS DDRESS DDRESS DDRESS DDRESS DDRESS	.4;	Change Addition Change Addition Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE TITLE TITLE TITLE	STD CAMPBELL, JOE 1875 N.W. 79TH STREET	DELETE DELETE	-1.4 C 2.1 Ti 2.2 N 2.3 S' 2.4 C 3.1 Ti 3.2 N 3.3 S' 3.4 C 4.1 Ti 4.2 N 4.3 Si 4.4 C 5.1 Ti 5.2 N 5.3 Si 5.4 C 6.1 Ti 6.2 N 6.3 Si	CITY-ST-Z LITTLE LAME LAME	DDRESS DDRESS DDRESS DDRESS DDRESS DDRESS DDRESS DDRESS	.4;	Change Addition Change Addition Change Addition

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 path; 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.