

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # K05600 (7)
 1. Corporation Name
PERO IV FARMS, INC.

Principal Place of Business 9852 MAJORCA PLACE BOCA RATON FL 33434	Mailing Address 9852 MAJORCA PLACE BOCA RATON FL 33434
--	--



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 12/08/1987 4. FEI Number 65-0016732 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
--	--	---	--	--	--

9. Name and Address of Current Registered Agent PERO, PETER, IV 9852 MAJORCA PLACE BOCA RATON FL 33434				10. Name and Address of New Registered Agent B1 Name PETER PERO IV B2 Street Address (P.O. Box Number is Not Acceptable) 14095 STATE ROAD 7 B3 B4 City DELRAY BEACH, FL B5 Zip Code 33446			
---	--	--	--	---	--	--	--

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 *Peter Pero IV* **PETER PERO IV PRES.** **4-29-98**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE	1.1 TITLE	PETER PERO IV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PERO, PETER, IV		1.2 NAME				
STREET ADDRESS	9852 MAJORCA PLACE		1.3 STREET ADDRESS	14095 STATE ROAD 7			
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP	DELRAY BEACH, FL 33446			
TITLE	VDT	<input type="checkbox"/> DELETE	2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PERO, CHARLES		2.2 NAME				
STREET ADDRESS	14095 STATE ROAD 7		2.3 STREET ADDRESS				
CITY-ST-ZIP	DELRAY BEACH FL		2.4 CITY-ST-ZIP				
TITLE	VSD	<input type="checkbox"/> DELETE	3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PERO, ANGELA		3.2 NAME				
STREET ADDRESS	14095 STATE ROAD 7		3.3 STREET ADDRESS				
CITY-ST-ZIP	DELRAY BEACH FL		3.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Peter Pero IV* **4-29-98** **ELL 1105 11057**

CR2E034 (10/97)