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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 11 1997 8:00am

Secretary of State

629-1447

2-5-97

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L08129

(3)

BERRETTINI HAY CO.

SIGNATURE:

Principal Place of Business ** ANGELO BERRETTINI 4255 W HWY 40 OCALA FL 32675		% ANGELO B 4255 W HWY	Mailing Address % ANGELO BERRETTINI 4255 W HWY 40 OCALA FL 34482-8503							
						3. Date Incorpora 08/08/1989		3a. Date 04/09	of Last R /1996	leport
·	Place of Business	2a. Mailing A	ddress			4. FEI Number	20			pplied For
Suite, Apt	# etc	26 Suite Ani	l # etc			59-206262	20			ot Applicable
22		- mg '	Suite, Apt. #, etc.			5. Certificate of S	Status Desired			Additional equired
City & Stat	ie .	City & Sta	ate			6. Election Camp	paign Financino		\$5.00	May Be
23		28				Trust Fund Co	•			to Fees
Zip	Counti	ry Zip	├─ ─	Country		8. This corporation	on has liability for it		x under s	. 199.032,
24	[25]	[29]	30			Florida Statute		Yes 🗌		
DCD		ess of Current Registered Age	ent	81	Name	10. Name and Ad	Idress of New Reg	gistered Ag	ent	
	rettini, angelo 5 w Hwy 40			["	Name					
	ALA FL 32675			82	Street A	ddress (P.O. Box Numbe	er is Not Acceptab	le)		
00/	-LA FE 020/0			83				·		
				84	City			FL	85 Zip	Code
11. Pursuant office or a agent. La	registered agent, or bott im familiar with, and acc	tions 607 0502 and 607 1508, Fl h, in the State of Florida. Such of cept the obligations of Section 6	hange was autno 607.0505, Florida	rized by Statutes	the corpo	oration's board of directo	statement for the pors. I hereby accep	t the appoir	hanging in ntment as	ts registered registered
office or r agent. La	registered agent, or bolt im familiar with, and acc	tions 607 0502 and 607 1508, Fi h, in the State of Florida Such of cept the obligations of Section 6 and of registered against and this it applicable DEFICERS AND DIRECTORS	hange was autho 607,0505, Florida (NOTE: Regi	rized by Statutes stered Age	the corpo	oration's board of directo equired when reinstating)	ors. I hereby accep	of the appoin	ntment as	registered
office or r agent. I a SIGNATURE	registered agent, or bolt im familiar with, and acc Sturable, typod or preted name C	h, in the State of Florida. Such disept the obligations of Section 6 are transferred against and tilk at applicable OFFICERS AND DIRECTORS	hange was autho 607,0505, Florida (NO1E: Regi	rized by Statutes	the corpo	oration's board of directo equired when reinstating)	statement for the pors. I hereby acception	DATE	ntment as	registered
SIGNATURE:	registered agent, or boll im familiar with, and acc Sturature, typical or ported name C D BERRETTINI, ANGE	h, in the State of Florida. Such disept the obligations of Section 6 are transferred against and till, it applicable OFFICERS AND DIRECTORS	hange was autho 607.0505, Florida (NOTE: Regi	rized by Statutes stered Age 13.	the corpo	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE	IRECTOR	registered
office or ragent. La SIGNATURE:	registered agent, or boll im familiar with, and acc Styrative typical or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida. Such disept the obligations of Section 6 are transferred against and till, it applicable OFFICERS AND DIRECTORS	hange was autho 607.0505, Florida (NOTE: Regi	rized by Statutes stered Age 13.	the corpo	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE	IRECTOR	registered
office or agent. I a SIGNATURE: 12. TILE NAME	registered agent, or boll im familiar with, and acc Sturature, typical or ported name C D BERRETTINI, ANGE	h, in the State of Florida. Such disept the obligations of Section 6 are transferred against and till, it applicable OFFICERS AND DIRECTORS	hange was autho 607.0505, Florida (NOTE: Reg	rized by Statutes stered Age 13. 1.1 TITLE 1.2 NAME	ADDRESS	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE	IRECTOR	registered
SIGNATURE: 12. TITLE NAME STREET ADDRESS	registered agent, or boll im familiar with, and acc Styrative typical or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida. Such dispert the obligations of Section 6 or registered agent and tills at applicable DEFICERS AND DIRECTORS	hange was autho 607.0505, Florida (NOTE: Reg	rized by Statutes stered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET	ADDRESS	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE ERS AND C	IRECTOR	registered
SIGNATURE: 12. TILE NAME STREET ADDRESS CHY-SI-ZP	registered agent, or boll im familiar with, and acc Styrative typical or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida. Such dispert the obligations of Section 6 or registered agent and tills at applicable DEFICERS AND DIRECTORS	hange was autho 607.0505, Florida (NOTE: Rog.] DELETE	rized by Statutes stered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S	ADDRESS	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE ERS AND C	PIRECTOR	RS IN 12
Office or agent. La SIGNATURE. 12. TILE NAME STREET ADDRESS CITY-ST-ZP TITLE	registered agent, or boll im familiar with, and acc Styrative typical or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida. Such dispert the obligations of Section 6 or registered agent and tills at applicable DEFICERS AND DIRECTORS	hange was autho 607.0505, Florida (NOTE: Reg.] DELETE	Fized by Statutes stered Age 113. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S 2.1 TITLE	ADDRESS	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE ERS AND C	PIRECTOR	RS IN 12
Office or agent. La SIGNATURE: 12. TILE NAME STREET ADDRESS CITY-ST-Z-P TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or boll im familiar with, and acc Styrative typical or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida. Such discrept the obligations of Section 6 and of registered against and tilk at applicable DEFICERS AND DIRECTORS.	hange was autho 607.0505, Florida (NOTE: Reg. DELETE	Statutes stered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY - S	ADDRESS ADDRESS	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE ERS AND C	PIRECTOF Change Change	RS IN 12 Addition
Office or agent. La SIGNATURE: 12. 11/LE NAME STREET ADDRESS C/I/Y-ST-Z-P TITLE NAME STREET ADDRESS CITY-ST-ZIP ITLE ITLE	registered agent, or boll im familiar with, and acc Styrative typical or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida. Such discrept the obligations of Section 6 and of registered against and tilk at applicable DEFICERS AND DIRECTORS.	hange was autho 607.0505, Florida (NOTE: Reginate Properties of the Control of t	rized by Statutes stered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY - S 3.1 TITLE	ADDRESS ADDRESS	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE ERS AND C	PIRECTOR	RS IN 12
Office or agent. La signature: 12. 111. 111. NAME STREET ADDRESS CHY-ST-Z-P TITLE NAME STREET ADDRESS CHY-ST-Z-IP TITLE NAME NAME NAME NAME	registered agent, or boll im familiar with, and acc Styrative typical or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida. Such discrept the obligations of Section 6 and of registered against and tilk at applicable DEFICERS AND DIRECTORS.	Thange was autho 607.0505, Florida (NOTE: Region 1) DELETE	rized by Statutes stered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY - S 3.1 TITLE 3.2 NAME	ADDRESS T-ZIP ADDRESS T-ZIP	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE ERS AND C	PIRECTOF Change Change	RS IN 12 Addition
Office or agent. La SIGNATURE: 12. 11/LE NAME STREET ADDRESS C/I/Y-ST-Z-P TITLE NAME STREET ADDRESS CITY-ST-ZIP ITLE ITLE	registered agent, or boll im familiar with, and acc Styrative typical or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida. Such discrept the obligations of Section 6 and of registered against and tilk at applicable DEFICERS AND DIRECTORS.	Thange was autho 607.0505, Florida (NOTE: Region 1) DELETE	rized by Statutes stered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY - S 3.1 TITLE	ADDRESS T-ZIP ADDRESS T-ZIP	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE ERS AND C	PIRECTOF Change Change	RS IN 12 Addition
Office or agent. La SIGNATURE. 12. TILE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	registered agent, or boll im familiar with, and acc Styrative typical or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida Such of cept the obligations of Section 6 and of registered against and tills at applicable OFFICERS AND DIRECTORS	hange was autho 607.0505, Florida (NOTE: Reg. DELETE DELETE	rized by Statutes stered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S	ADDRESS T- ZIP ADDRESS ADDRESS	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE ERS AND C	ntment as PIRECTOF Change	RS IN 12 Addition Addition
SIGNATURE: 12. 11/LE NAME STREET ADDRESS CITY-ST-ZP THLE NAME STREET ADDRESS CITY-ST-ZIP HTLE NAME STREET ADDRESS CITY-ST-ZIP HTLE NAME STREET ADDRESS CITY-ST-ZIP HTLE NAME	registered agent, or boll im familiar with, and acc Styrative typical or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida Such of cept the obligations of Section 6 and of registered against and tills at applicable OFFICERS AND DIRECTORS	Thange was autho 607.0505, Florida (NOTE: Region 1) DELETE DELETE DELETE	stered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY - S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY - S 4.1 TITLE 4.1 TITLE	ADDRESS T- ZIP ADDRESS ADDRESS	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE ERS AND C	PIRECTOF Change Change	RS IN 12 Addition
Office or agent. La signature: 12. Title NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME	registered agent, or boll im familiar with, and acc Styrative typical or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida Such of cept the obligations of Section 6 and of registered against and tills at applicable OFFICERS AND DIRECTORS	hange was autho 607.0505, Florida (NOTE: Rog.) DELETE DELETE DELETE	rized by Statutes stered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME	ADDRESS T- ZIP ADDRESS T- ZIP ADDRESS T- ZIP	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE ERS AND C	ntment as PIRECTOF Change	RS IN 12 Addition Addition
Office or agent. La signature: 12. Title NAME STREET ADDRESS CITY-ST-Z-P TITLE NAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS	registered agent, or boll im familiar with, and acc Styrative typic or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida Such of cept the obligations of Section 6 and of registered against and tills at applicable OFFICERS AND DIRECTORS	The detection of the control of the	stered Age stered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY - S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY - S 4.1 TITLE 4.2 NAME 4.2 NAME 4.3 STREET	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE ERS AND C	ntment as PIRECTOF Change	RS IN 12 Addition Addition
Office or agent. La signature: 12. Title NAME STREET ADDRESS CITY-ST-Z-P TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	registered agent, or boll im familiar with, and acc Styrative typic or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida Such of cept the obligations of Section 6 and registered agent and tills it applicable DEFICERS AND DIRECTORS	hange was autho 607.0505, Florida (NOTE: Rog.) DELETE DELETE DELETE	Statutes Stered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY - S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY - S 4.1 TITLE 4.2 NAME 4.2 NAME 4.3 STREET 4.4 CITY - S 4.4 CITY - S	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE ERS AND C	IRECTOR Change Change	RS IN 12 Addition Addition Addition
SIGNATURE: 12. THE NAME STREET ADDRESS CHY-ST-ZIP THE THE THE THE THE THE THE TH	registered agent, or boll im familiar with, and acc Styrative typic or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida Such of cept the obligations of Section 6 and registered agent and tills it applicable DEFICERS AND DIRECTORS	Thange was autho 607.0505, Florida (NOTE: Reg.) DELETE DELETE DELETE DELETE DELETE DELETE	Stand by Statutes stered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.3 TITLE 3.3 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.1 TITLE	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE ERS AND C	ntment as PIRECTOF Change	RS IN 12 Addition Addition
Office or agent. La signature: 12. Tite Name Street address City-St-2P Tite Name Street address City-St-2iP Tite Name Street address City-St-2iP Title Name	registered agent, or boll im familiar with, and acc Styrative typic or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida Such of cept the obligations of Section 6 and registered agent and tills it applicable DEFICERS AND DIRECTORS	hange was autho 607.0505, Florida (NOTE: Reg.) DELETE DELETE DELETE DELETE DELETE	Stand by Statutes stered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY - S 3.3 STREET 3.4 CITY - S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY - S 5.1 TITLE 5.2 NAME	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE ERS AND C	IRECTOR Change Change	RS IN 12 Addition Addition Addition
Office or agent. La signature: 12. Tite Name Street address City-St-Zip Title Name Street address	registered agent, or boll im familiar with, and acc Styrative typic or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida Such of cept the obligations of Section 6 and registered agent and tills it applicable DEFICERS AND DIRECTORS	Thange was autho 607.0505, Florida (NOTE: Reg.) DELETE DELETE DELETE DELETE DELETE DELETE	Statutes Statutes Statutes 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 STREET 5.5 STREET	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE ERS AND C	IRECTOR Change Change	RS IN 12 Addition Addition Addition
Office or agent. La signature: 12. Tite Name Street address City-St-2P Tite Name Street address City-St-2iP Tite Name Street address City-St-2iP Title Name	registered agent, or boll im familiar with, and acc Styrative typic or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida Such of cept the obligations of Section 6 and of registered agent and tilk at applicable DEFICERS AND DIRECTORS ELO	hange was autho 607.0505, Florida (NOTE: Regillaria) DELETE DELETE DELETE DELETE DELETE DELETE	Stand by Statutes stered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY - S 3.3 STREET 3.4 CITY - S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY - S 5.1 TITLE 5.2 NAME	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE ERS AND C	itment as IRECTOF Change Change Change	RS IN 12 Addition Addition Addition Addition
Office or agent. La signature: 12. Tite Name Street address City-St-Zip Title Name	registered agent, or boll im familiar with, and acc Styrative typic or picted rain C D BERRETTINI, ANGE 4255 W HWY 40	h, in the State of Florida Such of cept the obligations of Section 6 and of registered agent and tilk at applicable DEFICERS AND DIRECTORS ELO	DELETE DELETE DELETE DELETE DELETE DELETE DELETE DELETE	Stand by Statutes stered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.3 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 5.5 STREET 5.4 CITY-S 5.4 CITY-S 5.5 STREET 5.4 CITY-S 5.5 STREET 5.5 COMME	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	oration's board of directo equired when reinstating)	ors. I hereby accep	DATE ERS AND C	IRECTOR Change Change	RS IN 12 Addition Addition Addition

6.4 CITY - ST - ZIP

14. If do 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.