2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jun 29, 2006 08:00 AN Secretary of State

Principal Place of Business J. Mulling Address Suite, Apt. 4, sto: City & State Ci	DOCUMENT # L38207 1. Entity Name TOWN AND COUNTRY FARMS CORP.							Secretary	of Sta	
Suite, Apt. 4, etc. City & State	703 WATERF	ORD WAY, SUITE 800	703 WATERFORD WAY	703 WATERFORD WAY, SUITE 800		1 (BE)(10(4 BE	4 (224) 2017 1102 00111 101		11 881 (1 1 78 1	
City & State City & State City & State City & State 4. FENumber 6. Fent 65-0162021	2. Principal Place of Business 3.		3. Mailing Address	. Mailing Address						
Zip Country Zip Country S. Centricate of Status Desired \$8.75 And Applicable See And Address of Current Registered Agent 7. Name and Address of New Registered Agent PITTS, W. DOUGLAS 703 WATERFORD WAY, SUITE 800 MIAMI, FL 33126 8. The above named only submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am furniller with, and accept the obligations of registered agent, or both, in the State of Florida. I am furniller with, and accept the obligations of registered agent, or both, in the State of Florida. I am furniller with, and accept the obligations of registered agent, or both, in the State of Florida. I am furniller with, and accept the obligations of registered agent, or both, in the State of Florida. I am furniller with, and accept the obligations of registered agent, or both, in the State of Florida. I am furniller with, and accept the obligations of registered agent, or both, in the State of Florida. I am furniller with, and accept the obligations of registered agent, or both, in the State of Florida. I am furniller with, and accept the obligations of registered agent, or both, in the State of Florida. I am furniller with, and accept the obligations of registered agent, or both, in the State of Florida. I am furniller with, and accept the obligations of registered agent, or both, in the State of Florida. I am furniller with, and accept the obligations of registered agent, or both, in the State of Florida. I am furniller with, and accept the obligations of registered agent, or both, in the State of Florida. I am furniller with, and accept the obligations of registered agent, or both, in the State of Florida. I am furniller with, and accept the obligations of registered agent, or both, in the State of Florida. I am furniller with, and accept the obligations of registered agent, or both, in the State of Florida. I am furniller with, and accept the obligations of registered agent, or both, in the State of Florida. I am furn	Suite, Apt. *, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			Chg-P	CR2E034 (11/05)		
S. Name and Address of Current Registered Agent PITTS, W. DOUGLAS 7.03 WATERFORD WAY, SUITE 800 MIAMI, FL 33126 Sireal Address (P.O. Box Number is Not Acceptable) City FL Zip Code City City FL Zip Code City FL Zip Code City City FL Zip Code Code City City FL Zip Code City City FL Zip Code Code City City FL Zip Code Code Code City City City FL Zip Code Code Code City Ci	City & State		City & State	City & State						
PITTS, W. DOUGLAS 703 WATERFORD WAY, SUITE 800 MIAMI, FL 33126 City FL Zip Code C	Zip		ountry Z _i p Cou		itry		Fee Required			
Streat Address (P.O. Box Number is Not Acceptable) Streat Address (P.O. Box Number is Not Acceptable)		6. Name and Address of Current F	Registered Agent		A 1	7. Name and	Address of New F	Registered Agent		
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature Signature lipsed or prefer instead agent and title if applicable. (NOTE: fleedenish Agent aground when remaining) DATE	703 WATE	RFORD WAY, SUITE 800						e)		
SIGNATURE Signature Signa					City			FL Zip Cod	e	
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE VD COURTELIS, LOUISE H STRET ADDRESS OTITY-ST-2P MIAMI, FL 33126 TITLE VT 703 WATERFORD WAY, SUITE 800 MIAMI, FL 33126 TITLE VSD MIAMINI MIAMINI MIAM	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.									
Trust Fund Contribution. Added to Fees Corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILE VD										
TITLE						55.00 May Be Added to Fees				
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	NAME STREET ADDRESS CITY-ST-ZIP	and the that the information (1991)		NAM Stri City	NE EET ADDRESS '-ST-ZIP	nod in Charles 11) Florido Statuto-			

indicated on this report or supplemental boords 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 true be empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TOP BIGHING OFFICIAL OR COALD COALD

6 305-26/-43 Daylina Prione #