## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## FILED Mar 23, 2006 8:00 am Secretary of State

DOCUMENT # P01000037961  1. Entity Name M&S FERTILIZER & FARM, INC.					) 	03-23-2006 9	0014 036 ***15	0.00	
Principal Place	e of Business	Mailing Address			400				
		RT. 3, BOX 309 Lake Butler, FL 320	54						
LAINE DOTEL	N, 1E 32037	BARE BOTELIÇTE SEO	<b>.</b>		1 10000001101 0	CITI NTN BEIN BENI BENI 1	ENIUM IPEK PUNIM KALIM ANTAK M	0 (8 D) (1 (8 P)	
2. Principal P	lace of Business	3. Mailing Address							
8558	· / \	85185W	CR	241		<b>Bibl ifbil maril ma</b> ilf <b>am</b> ili i	RRIND ATTRIBURE IRRIN BRIEF AT	#### II 19#I	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		03052006	Chg-P	CR2E034 (11/05)		
City & State	8	City & State			4. FEI Number		A	pplied For	
710	Country	Zin	Count	······································	59-3716	983		ot Applicable	
ZIp	Country	Zip	Couri	иу	5. Certificate of	f Status Desired	S8.75 Add Fee Require		
	6. Name and Address of Current	Registered Agent		Name	7. Name and	ddress of New Re	gistered Agent		
SMITH, JO	SHUA								
RT. 3, BOX 309				Street Address	treet Address (P.O. Box Number is Not Acceptable)				
LAKE BUT	LER, FL 32054								
				City			FL Zip Coo	le	
8. The above	named entity submits this statement to	r the purpose of changing its	registere	l ed office or regist	ered agent, or both	, in the State of Flori		and accept	
the obligat	ions of registered agent								
SIGNATURE_	Significe, typed or printed name of registered agent	and title if anniicehia (NOTE	- Flerikterer	d Agent signature requir	ed when reinstating)	3-1	13-06 DATE		
· ·									
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.	9. Election Campai Trust Fund Cont	-		5.00 May Be ided to Fees				
10.	OFFICERS AND		11.		ADDITIONS/C	HANGES TO OFFIC	CERS AND DIRECTOR		
TITLE TO THE TANK	SMITH, JOSHUA	[] Delete	TITLE			ارم م	Change	☐ Addition	
STREET ADDRESS	RT. 3, BOX 309			ET ADORESS 8.	558 Su	ce 24.	J		
CITY-ST-ZIP	LAKE BUTLER, FL 32054			-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME		☐ Delete	NAMI				C) Change		
STREET ADDRESS									
	1			ET ADDRESS					
CITY-ST-ZIP		. □ Dolete	CITY	-ST-ZIP			Channe	Addition	
TITLE NAME		□ Ceicte		-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS		Delete	CITY TITLE NAME STRE	-ST-ZIP E E	- <del> </del>		☐ Change	Addition	
TITLE NAME STREET ADDRESS CHY-ST-ZIP			CITY TITLE NAME STRE	- ST- ZIP  E E E TADORESS - ST- ZIP			·	Addition	
TITLE NAME STREET ADDRESS		Delete	CITY TITLE NAME STRE CITY TITLE	-ST-ZIP  E  E  -ST-ZIP  E  -ST-ZIP  E			☐ Change		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			CITY- TITLE NAME STRE CITY- TITLE NAME STRE	-ST-ZIP  E E - E - E			·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			CITY- TITLE NAME STRE CITY- TITLE NAME STRE	-ST-ZIP  E E E			·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	CITY TITLE NAME STRE CITY TITLE NAME STRE CITY TITLE NAME TITLE NAME NAME NAME NAME NAME NAME NAME NAM	-ST-ZIP  E E E T - T - T - T - T - T - T - T -			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Delete	CITY TITLE NAME STRE CITY TITLE NAME STRE CITY TITLE NAME STRE	-ST-ZIP  E E E T - T - T - T - T - T - T - T -			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ Delete	CITY TITLE NAME STRE CITY TITLE NAME STRE CITY TITLE NAME STRE	-ST-ZIP  E E E - E E T - ADDRESS -ST-ZIP  E E E E E E E E E E E E E E E E E E			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ Delete	CITY TITLE NAME STRE CITY TITLE NAME STRE CITY TITLE NAME STRE CITY NAME STRE CITY NAME STRE CITY	-ST-ZIP  E E E			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Delete	CITY TITLE MAME STRE CITY TITLE NAME STRE CITY TITLE NAME STRE CITY TITLE NAME STRE STRE STRE STRE STRE	-ST-ZIP  E E E E E T			☐ Change	Addition	
TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with a certify that the information supplied with a certific the certific that the	Delete Delete	CITY TITLE MAMME STREE CITY TITLE NAMM STREE CITY TITLE NAMM STREE CITY TITLE NAMM STREE CITY TITLE NAMM STREE CITY	-ST-ZIP  E E E EET ADDRESS -ST-ZIP  E EET ADDRESS -ST-ZIP  E IE EET ADDRESS -ST-ZIP  E IE EET ADDRESS -ST-ZIP  E IE E-	ed in Chapter 119,	Florida Statutes. I f	Change	Addition  Addition	

3-13-06