

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Jun 21, 2005 8:00 am
Secretary of State

05-20-2005 90033 011 ***150.00

DOCUMENT # P02000005375

1. Entity Name

ROUTE 80 WHOLESALE FEEDS & ANIMAL INC.



Principal Place of Business

1071 HENDRY ISLE BLVD
CLEWISTON, FL 33440

Mailing Address

1071 HENDRY ISLE BLVD
CLEWISTON, FL 33440

66043001



06132005

No Chg-P

CR2E034 (10/03)

4. FEI Number

01-0574138

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HERNANDEZ, GLADYS
1071 HENDRY ISLE BLVD
CLEWISTON, FL 33440

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME HERNDNEZ, GABRIEL G SR
STREET ADDRESS 1071 HENDRY ISLE BLVD
CITY-ST-ZIP CLEWISTON, FL 33440

TITLE D
NAME HERNDNEZ, GABRIEL G JR
STREET ADDRESS 2031 SW 127TH CT
CITY-ST-ZIP MIAMI, FL 33175

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR


Date

Daytime Phone #

5/26/05

2005 FOR PROFIT CORPORATION ANNUAL REPORT

5/20/2005-90033-011-\$150.00-\$150.00

DOCUMENT # P02000005375		
1. Entity Name ROUTE 80 WHOLESALE FEEDS & ANIMAL INC.		

ATTACHMENT

66023507

Principal Place of Business 1071 HENDRY ISLE BLVD CLEWISTON, FL 33440	Mailing Address 1071 HENDRY ISLE BLVD CLEWISTON, FL 33440
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2. Principal Place of Business 701 Hendry Isle Blvd.	3. Mailing Address 701 Hendry Isle Blvd.
Suite, Apt. #, etc. C1	Suite, Apt. #, etc.

05182005 Chg-P CR2E034 (10/03)

City & State Clewiston Fla	City & State Clewiston Fla
Zip 33440	Zip 33440
Country USA	Country USA

4. FEI Number 01-0574138	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HERNANDEZ, GLADYS 1071 HENDRY ISLE BLVD CLEWISTON, FL 33440	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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.

SIGNATURE _____ (NOTE: Registered Agent signature required when renewing) DATE _____

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input type="checkbox"/> Delete HERNDNEZ, GABRIEL G SR 1071 HENDRY ISLE BLVD CLEWISTON, FL 33440
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input type="checkbox"/> Delete HERNDNEZ, GABRIEL G JR 2031 SW 127TH CT MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 701 Hendry Isle Blvd. Clewiston Fla 33440
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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SIGNATURE: Gladys Hernandez Gladys HERNANDEZ 4/26/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #