2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Sep 15, 2003 8:00 am Secretary of State

08-27-2003 90082 045 ***150.00

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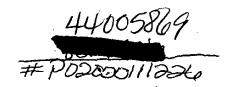
1. Entity Nan	MENT # P0200 'S FARM FEED & SUPPLY,	08-27-2003 90082 045 ***150.00							
Principal Place of Business 3483 #E SW PALM CITY SCHOOL AVE. PALM CITY FL 34990		Mailing Address 3483 #E SW PALM CITY SCHOOL AVE. PALM CITY FL 34980			44005869				
			•						
2. Principal F	Place of Business	3. Mailing Address							1
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		City & State			FEI Number 0	033249		oplied For ot Applicable	
Zip Country		Zip	Country		5. Certificate of Status	Desired	\$8.75 Ad Fee Require		
	6. Name and Address of Current F	legistered Agent		'	7. Name and Addres	s of New Registered	Agent		_
				Name					
FISCHER, CYNTHIA J 2958 SE ORCHID ST.			ľ	Street Address	(P.O. Box Number is Not.	Acceptable)			1
STUART FL 34997			.						1
•				City		Fl	Zip Cod	e	1
After Se	Signature, typed or printed name of registered agent as ILE NOW!!! FEE IS \$550.00. otember 10, 2003 Fee will be \$750. or Payable to Florida Department of	00	: Hegistered /	Agent signature require	9. Election Ca	Mipelgin Financing Contribution.		May Be	
10.	OFFICERS AND D		11.		ADDITIONS/CHANG	S TO OFFICERS AN			۽ [
TITLE NAME STREET ADDRESS CITY-ST-ZIP	.D FISCHER, MICHAEL T 3483 #E SW PALM CITY SCHOO PALM CITY FL 34990	□ Daleta L AVE.	TITLE NAME STREET CITY-S	ADDRESS ST-ZIP			☐ Change	Addition	2E024 /4/0
TITLE NAME STREET ADDRESS CITY-S1-ZIP	D FISCHER, CYNTHIA J 3483 #E SW PALM CITY SCHOO PALM CITY FL 34990	Delete	TITLE - NAME STREET CITY-S	ADDRESS IT-ZIP			☐ Change	Addition]8
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Deleta	TITLE NAME STREET CITY-S	ADDRESS T-ZIP			Change	Addition	
TITLE NAME		☐ Delete	TITLE NAME				Change	Addition	
STREET ADDRESS CITY-ST-ZIP	•		STREET -CITY-S	ADDRESS T=ZIP===================================		·		-	-
nne		☐ Delete	TITLE				☐ Change	Addition	1
NAME Street address City-St-Zip	•		NAME STREET CITY-ST	ADDRESS T- ZIP				1	
TITLE NAME STREET ADORESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET CITY-ST	ADORESS I-ZIP			☐ Change	Addition	

12. I hereby certify that the information supplied with this filling 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.

772 223-1333 Daytime Phone #

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Attachment



aug - 25, 2003

Dear Sio;

I am writing to upu in theperence it the Coorporation filing fee. I am a new business Twent & was not aware of this fee and also died not receive any forme to make - me aware. Our mailboxes are 14 mile away - from the buy and sometimes people getour mail My new accountant telper las asked -The about whether I sent it unal I didn't know I was required to since this is the 1st time l'e cever had my our business. Would you consider wairing the late fee of 54000 for me and next upon I will make it a point to ipay in faminy. I do apology for this difense, about not receiving as we do have confusion around this mail route. Thankyou. Rlease consider or please det me know.

(772):223-1333

Cyntra f. Lischer 2958 Se Orchid St. Stuart #1. 34997

> Business: 3483 SW Palpe City School are Bay # E Palmary F1. 34990.