2005 FOR PROFIT CORPORATION

FILED Mar 07, 2005 8:00 am ANNUAL REPORT

Mailing Address Salaria Salaria Mailing Address Salaria	DOCUMENT # P0400033565 1. Entity Name SWEET MEAT CATTLE COMPANY, INC.					Secretary of State 03-07-2005 90289 027 ***150.00				
### PENFIELD, MARK F 18141 NALLE ROAD **SIGNATURE** **SIGNATURE*	Principal Place	e of Business	Mailing Address							
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City & State										
Zip Country Zip Country S. Certificate of Status Desired S. \$75 Additional Fee Phelipsed 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 8. The above named entry 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 he chilgations of registered agent, or both, in the State of Florida. I am familiar with, and accept the childation of registered agent, or both, in the State of Florida. I am familiar with, and accept the childation of registered agent. Signature Tell Registered agent of protection of indigened agent with the factorization. (ICITE Registered Agent growthen sealed dron instituting) ONTE FILE NOWITH FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. ITIE ITIE PENTIFIELD, MARK F SIRET ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. ITIE VP Change Addition ITIE NAME SIRET ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Change Addition ITIE NAME SIRET ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Change Addition ITIE NAME SIRET ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Change Addition ITIE NAME SIRET ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Change Addition ITIE NAME SIRET ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Change Addition ITIE NAME SIRET ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Change Addition ITIE NAME SIRET ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Change Addition ITIE NAME SIRET ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Change Addition NAME SIRET ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Change Addition NAME SIRET ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Change Addition NAME SIRET ADDITIONS/CHANGES TO OFFICERS AND ADDITIONS SIRET ADDITIONS/CHANGES TO OFFICERS AND ADDITIONS SIRET ADDITIONS/CHANGES TO O					03052005	Chg-P	CR2E03			
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PENFIELD MARK F 18141 NALLE ROAD NORTH FORT MYERS, FL 33917	Zip			Coun	try				ee Required	
Street Address (P.O. Box Number is Not Acceptable) City		6. Name and Address of Curre	nt Registered Agent		Name	_ 7. Name and A	ddress of New Re	gistered A	gent	
NORTH FORT MYERS, FL 33917 — City FL Zip Code 8. The above named entry submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am farmiliar with, and accept the obligations of registered agent. SIGNATURE Synaths. Liposit or printed name of implications of projected agent and see it explication. (NOTE Registered Agent a	PENFIELD, MARK F									
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. I am familiar with, and accept the obligations of registered agent. Signature. Free or orthodorume of registered agent. (NOTE Registered Agent algorature required when reintacting) TILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. ITILE PENFIELD, MARK F. STREET ADDRESS 1814 IN ALLE ROAD STREET ADDRESS 1814 IN ALLE ROAD STREET ADDRESS 1814 IN ALLE ROAD STREET ADDRESS CITY-S1-2P STREET A			. سام ما المام		Street Address ((P.O. Box Number	is Not Acceptable)	<u> </u>		
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Signature, typoed to printed rame of registered agent ed steer if applicable. (NOTE: Registered Agent algoritation when neinstating) DATE			for the purpose of changing its	s register	ed office or registe	red agent, or both	, in the State of Flori	da. I am f	amiliar with,	and accept
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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	After Ma 10. IIILE NAME STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	P PENFIELD, MARK F 18141 NALLE ROAD NORTH FORT MYERS, FL 33 VP RITTER, LELAND G JR 5796 ENTERPRISE PARKWAY FORT MYERS, FL 33905	9. Election Campa Trust Fund Con Delete 1917 Delete Delete Delete Delete	aign Finar atribution. 111. TITU NAM STRE CITY	Add Standards Add Add Add Add Add Add Add	.00 May Be ded to Fees	CHANGES TO OFFICE	:	☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition Addition

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: