FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Apr 28 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P93000032194 (1) SOW A SEED A DAY, INC. Principal Place of Business Mailing Address 1490 BANKS ROAD 1490 BANKS ROAD MARGATE FL MARGATE FL DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/29/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0547666 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent GRANDELL, RILEY E. 1490 BANKS RD. Street Address (P.O. Box Number is Not Acceptable) MARGATE FL 33063 83 City 84 Zip Code 85 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typod or printed name of registered agent and tille if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE TITLE THOMAS, RICHARD W NAME 1.2 NAME 1490 BANKS ROAD STREET ADDRESS 1.3 STREET ADDRESS MARGATE FL CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition NAME GRANDELL, RILEY 22 NAME STREET ADDRESS 1490 BANKS ROAD 23 STREET ADDRESS MARGATE FL CITY-ST-7IP 2.4 CITY-ST-ZIP DELETE Addition Change TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change TITLE 6.1 TITLE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

on supplified with this filing does not qualify for the exemption stated in Section 119.07(3)(I). Florida Statutes. I further certify that the information supplimental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an ion or the receiver or vurtee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. I hereby certify that the inform indicated on this annual repo-officer or director of the corpo Block 12 or Block 13 if chang

SIGNATURE:

CITY-ST-ZIP

RILEY E.GRANDEL