## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State #

DOCUMENT # P93000033275 (7)

EDNEY FARMS, INC.

Principal Place of Business

21140 SW 179 AVE

Mailing Address

21140 SW 179 AVE

## FILED Apr 04 1997 8:00am Secretary of State



Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  Country  Zip  Co	Special Place of Business   Special Place	96
Salad April 6, act   Salad A	SASO   NW CTY Rd   28   Suite, Apt if it etc.	A C 1 C
City & State   City & State   City & State   City & State   Selection Campaign Financing   S.0.00 May be added to Pees   Add	City & State   27	Not Applicable
City & State 2   A   Och Los   FL   28   Allock   FL   28   Allock   FL   28   Allock   Florida Statutes   F	City & State 2 A Country   28   Discharacter   28   Discharacter   29   Country   29   Discharacter   29	
Zip   Country   Zip   Country   Zip   Country   Sin This corporation has lability for intangible tax under s. 199 032, Plorida Statutes   Zip	213   20   22   23   25   25   25   25   25   25	
9. Name and Address of Current Registered Agent  EDNEY, BARBARA G. 21140 SW 179 AVENUE MIAMI FL 33187  11. Pursuant to the provisions of Sections 607.0502 and 607 1508. Florida Statutes, the above-named between the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was surficized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida. Such change was surficized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent are favolative and accept the obligations of Section 607.0506, Florida Statutes.  SIGNATURE  SIGNATURE  PO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  PO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. STD	B. Name and Address of Current Registered Agent  EDNEY, BARBARA G. 21140 SW 179 AVENUE MIAMI FL 33187  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutas, the above-named corporations but into the Nat Acceptable).  32. Street Address (P.O. Box Number is Nat Acceptable).  33. City Screet Address (P.O. Box Number is Nat Acceptable).  34. City Screet Address (P.O. Box Number is Nat Acceptable).  35. STREET Address (P.O. Box Number is Nat Acceptable).  36. City Screet Address (P.O. Box Number is Nat Acceptable).  36. City Screet Address (P.O. Box Number is Nat Acceptable).  37. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  38. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  39. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. This EDNEY, LEWIS P  11. This EDNEY, LEWIS P  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. City Screet Address (P.O. Box Number is Nat Acceptable).  35. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  16. Init EDNEY, LEWIS P  17. This EDNEY, LEWIS P  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  29. ADDITIONS/CHANGES TO OFFICERS A	ler s. 199.032,
21140 SW 179 AVENUE MIAMI FL 33187  B2 Street Address (P.O. Box Number is Not Acceptable)  B3 Street Address (P.O. Box Number is Not Acceptable)  B4 City Sonta FL FL B5 Zip Code  B5 Zip Code  B6 City Sonta FL FL B5 Zip Code  B6 Zip Code  B7 Zip	21140 SW 179 AVENUE MIAMI FL 33187  11. Pursuant to the provisions of Sections 607 0502 and 807 1508. Florida Statutes the above-named corporation submits his statement for the purpose of change of these or registered agent, or both in the State of Florida. Such changes as authors are registered agent and accept the obligations of Section 807 0505, Florida Statutes, the above-named corporation submits his statement for the purpose of change of the provisions with an application of Section 807 0505, Florida Statutes, the above-named corporation submits his statement for the purpose of change of the provisions with an application of Section 807 0505, Florida Statutes, the above-named corporation submits his statement for the purpose of change of the submits of the provision by the application of Section 807 0505, Florida Statutes, the above-named corporation submits his statement for the purpose of change of the application of Section 807 0505, Florida Statutes, the above-named corporation submits his statement for the purpose of change of the application of the provision statement for the purpose of change of the application of the provision statement for the purpose of changes are discovered agent and statement for the purpose of changes are discovered agent and accept the application of the provision statement for the purpose of changes are discovered agent and accept the application of statement for the purpose of the application in the Statement for the purpose of the application in the Statement for the purpose of the application in the Statement for the purpose of the provision statement for the purpose of the application in the Statement for the purpose of the application in the Statement for the purpose of the application in the Statement for the purpose of the applications to the purpose of discovered agent admits an application and accept the application in the Statement for the purpose of discovered agent admits an application and accept the application and accept the application and accept the applic	
## City Surface   Addiess (P.O. Box Number is Not Acceptable)   33 (a)    ## City Surface   FL   85   Zip Code   ## City Surface   FL	## City Sonto Fee Provisions of Sections 697.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changer of these or registered agent, or both, in the State of Priorda. Such change was submixed by the corporation's board of directors. I hereby accept the appointment agent it are framed registered agent and before the provision's of Sections 697.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changer of the corporation's board of directors. I hereby accept the appointment agent it are framed registered agent age	~~ \/
11. Pursuant to the provisions of Sections 607 0500 and 607 1508, Florida Statutes, the above-named corporation shufflet is statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of Section 507,0505, Florida Statutes, the above-named corporation is board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 507,0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS IN 12.  DATE  12. OFFICERS AND DIRECTORS IN 12.  DELETE  1.1 TITLE  DELETE  1.1 TITLE  EDNEY, LEWIS P  21140 SW 179 AVE  MIAMI FL  SID  SIGNATURE  1.2 NAME  DELETE  1.1 TITLE  SID  SIGNATURE  SID  SIGNATURE  SID  SIGNATURE  1.2 NAME  SIRELADRESS  CITY SI-2P  MIAMI FL  SID  SID  SIGNATURE  SID  SIGNATURE  SID  SIGNATURE  SID  SIGNATURE  SID  SIGNATURE  1.1 TITLE  SID  SIGNATURE  SID  SIGNATURE  SID  SIGNATURE  SID  SIGNATURE	11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changer 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 agent in far-father with, and seccept the obligations of, Section 607-0505, Florida Statutes.  SIGNATURE	0
Agent   fem familiar ywth, and accept the obligations of, section 607.0505, Florida Statutes.  Signature: Signature: Sylvation or problem name of registered agend and the if applicable (NOTE: Registered Agent eighabre required when reinstating)  12.	Agent Fair familiar yeth, and accept the obligations of, section 807,000, Florida Statutes.  SIGNATURE  DELETE Signature Sychic period parties of period and the clinapse and th	32615
SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12    ITEE	SIGNATURE	ng its registered it as registered
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12    DELETE	12. OFFICERS AND DIRECTORS  DELETE  DILE  DAME  EDNEY, LEWIS P  21140 SW 179 AVE  MIAMI FL  SITU  SITU	-97
THE PD DELETE 11 THE EDNEY, LEWIS P 12 NAME 13 STREET ADDRESS PO BOX 1480 N/A  STREET ADDRESS PO BOX 1480 N/A  Addition PO	THE NAME  STREET ADDRESS  CITY ST 2P  MIAMI FL  STD  CITY ST 2P  MIAMI FL  STREET ADDRESS  CITY ST 2P  MIAMI FL STREET ADDRESS  CITY ST 2P  MIAMI FL STREET ADDRESS  CITY ST 2P  MIAMI FL STREET ADDRESS  CITY ST 2P  MIAMI FL STREET ADDRESS  CITY ST 2P  MIAMI FL STREET ADDRESS  CITY ST 2P  MIAMI FL STREET ADDRESS  CITY ST 2P  MIAMI FL STREET ADDRESS  CITY ST 2P  MIAMI FL STREET ADDRESS  CITY ST 2P  MIAMI FL STREET ADDRESS  CITY ST 2P  MIAMI FL STREET ADDRESS  CITY ST 2P  MIAMI FL STREET ADDRESS  CITY ST 2P  MIAMI FL STREET ADDRESS  CITY ST 2P  MIAMI FL STREET ADDRESS  CITY ST 2P  MILE  MAME  STREET ADDRESS  ST	TORS IN 12
NAME   STREET ADDRESS   1.2 MAME   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP	NAME   EDNEY, LEWIS P   12 NAME   13 STREET ADDRESS   14 CITY-ST-ZIP   13 STREET ADDRESS   14 CITY-ST-ZIP   14 CITY-ST-ZIP   15 TITLE   15 TI	
TILE STD STD STD STD STREET ADDRESS CITY-ST-ZIP ST DELETE STD ST DELETE ST D	MAMN   FL   MAMN   FL   MAMN   FL   MAMN   FL   MAMN   M	
TILE STD STD STD STD STREET ADDRESS CITY-ST-ZIP ST DELETE STD ST DELETE ST D	MAMN   FL   MAMN   FL   MAMN   FL   MAMN   FL   MAMN   M	
DELETE   STD   STD   STREET ADDRESS   CITY-ST-ZIP   DELETE   STD   STREET ADDRESS   CITY-ST-ZIP   DELETE   STD   STREET ADDRESS   CITY-ST-ZIP   DELETE   STD   STREET ADDRESS	STD	
21140 SW 179 AVE	STREET ADDRESS   21140 SW 179 AVE	inge Addition
City-St-ZiP   MIAMI FL 33187	DELETE   STITLE   DELETE   STITLE   Charles	
DELETE   3.1 TITLE   Change   Addition	DELETE   DELETE   STITLE   Chark   NAME   STREET ADDRESS     CHY-ST-ZIP   DELETE   STREET ADDRESS     CHY-ST-ZIP   DELETE   Chark   NAME   STREET ADDRESS     CHY-ST-ZIP   Chark   STREET ADDRESS   STREET ADDRESS     CHY-ST-ZIP   Chark   NAME   STREET ADDRESS     STREET ADDRESS   STREET ADDRESS   STREET ADDRESS     STREET ADDRESS   STREET ADDRESS   STREET ADDRESS     STREET ADDRESS   STREET ADDRESS   STREET ADDRESS   STREET ADDRESS     STREET ADDRESS   STREET ADDRESS   STREET ADDRESS   STREET ADDRESS   STREET ADDRESS   STREET ADDRESS   STREET ADDRESS   STREET ADDRESS   STREET ADDRESS   STREET ADDRES	
NAME	STREET ADDRESS	
3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   3.4 CITY-ST-ZIP   7.1 TITLE   Change   Addition	STREEL ADDRESS   33 STREET ADDRESS   34 CITY-ST-ZIP	ange 🔲 Additio
3.4 CITY-ST-ZIP     3.4 CITY-ST-ZIP	CITY-ST-ZIP	
TITLE         DELETE         4.1 TITLE         Change         Addition           NAME         4.2 NAME         4.3 STREET ADDRESS         CITY - S1 - ZIP         4.4 CITY - ST - ZIP         Change         Addition           TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         5.2 NAME         Addition         Addition	DELETE	
NAME	NAME	
A3 STREET ADDRESS	STREET ADDRESS	inge 🔲 Additio
CITY-51-28P         4.4 CITY-ST-2IP           TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         5.2 NAME         Addition         Addition	A4 CITY-ST-ZIP	
TITLE        OELETE         5.1 TITLE        Change        Addition           NAME         5.2 NAME	TILLE	
NAME 5.2 NAME	NAME         52 NAME           STREET ADDRESS         53 STREET ADDRESS           CITY-ST-ZIP         54 CITY-ST-ZIP           TITLE         DELETE         6.1 TITLE         Char           NAME         62 NAME         Char	
	STREET ADDRESS	inge 🔛 Additio
STREET ADDRESS 5.3 STREET ADDRESS	CITY - ST - ZIP	
	TITLE         DELETE         6.1 TITLE         Char           NAME         62 NAME	
	NAME 62 NAME	
TITLE DELETE 6.1 TITLE Change Addition		ange 🔲 Additio
NAME 6.2 NAME	STREET ADDRESS 63 STREET ADDRESS	
STREET ADDRESS 6.3 STREET ADDRESS		
I	64 City-St-ZiP  14. Foo 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	

4. To hereby certify that the information supplied with this hing does not qualify for the exemption stated in Section 119.07(3)(i), hinded states, information information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; the lam 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

Barbara G. Editor

2-14-97

462-155