FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P 93000039074

1. Corporation Name
MILK & HONEY INC.

Principal Place of Business	Mailing Address
120 EDGEWOOD TERRACE SANTA ROSA BEACH,FL. 32459	P.O. BOX 1646 SANTA ROSA BEACH,FL. 32459-1646

2. Principal Place of Business
21 120 EDGEWOOD TERRACE
Suite, Apt. #, etc.
22
City & State
23 SANTA ROSA BEACH FL
Zip
24 32459
Country
25

2a. Mailing Address
26 P.O. BOX 1646
Suite, Apt. #, etc.
27
City & State
28 SANTA ROSA BEACH,FL.
Zip
29 32459
Country
30 USA

3. Date Incorporated or Qualified: 5-26-93
3a. Date of Last Report: 6/8/95
4. FEI Number: 59-3175753 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

DONALD J. HELLER
120 EDGEWOOD TERRACE
SANTA ROSA BEACH,FL.
32459

10. Name and Address of New Registered Agent

81 Name: DONALD J. HELLER
82 Street Address (P.O. Box Number is Not Acceptable): 3696 BAY GROVE ROAD
83 FREEPORT,FL. 32439
84 City: FREEPORT, FL 85 Zip Code: 32439

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 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] MAY 24,1996
Signature, Registered Agent — DATE

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT	☐ DELETE
NAME	DONALD J. HELLER	
STREET ADDRESS	3696 BAY GROVE ROAD	
CITY-ST-ZIP	FREEPORT,FL.32439	
TITLE	SECRETARY	☒ DELETE
NAME	DONALD J. HELLER	
STREET ADDRESS	3696 BAY GROVE ROAD	
CITY-ST-ZIP	FREEPORT,FL.32439	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE		☐ Change ☐ Addition
1 2 NAME		
1 3 STREET ADDRESS		
1 4 CITY-ST-ZIP		
2 1 TITLE	SECRETARY	☒ Change ☐ Addition
2 2 NAME	RICHARD C. HELLER	
2 3 STREET ADDRESS	3696 BAY GROVE ROAD	
2 4 CITY-ST-ZIP	FREEPORT,FL.32439	
3 1 TITLE	TREASURER	☐ Change ☒ Addition
3 2 NAME	DANIEL G. HELLER	
3 3 STREET ADDRESS	3696 BAY GROVE ROAD	
3 4 CITY-ST-ZIP	FREEPORT,FL.32439	
4 1 TITLE		☐ Change ☐ Addition
4 2 NAME		
4 3 STREET ADDRESS		
4 4 CITY-ST-ZIP		
5 1 TITLE		☐ Change ☐ Addition
5 2 NAME		
5 3 STREET ADDRESS		
5 4 CITY-ST-ZIP		
6 1 TITLE		☐ Change ☐ Addition
6 2 NAME		
6 3 STREET ADDRESS		
6 4 CITY-ST-ZIP		

100001845501 5/30 JZ
-05/31/96--01020--024
***233.75

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the 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; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] DONALD J. HELLER,PRES. 5/24/96 (904)267-1771
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)