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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000085024 (6)

WHAT'S YOUR BEEF?, INC.

Principal Place of Business Mailing Address 665 E 70TH AVE 665 E 70TH AVE UNIT 5 LINIT 5 DO NOT WRITE IN THIS SPACE DENVER CO 80229 DENVER CO 80229 3. Date Incorporated or Qualified 12/13/1993 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3213789 Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes Yes 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name HOFFER, JENNIFER 3480 COUNTRYSIDE BLVD., #38 82 Street Address (P.O. Box Number is Not Acceptable) CLEARWATER FL 34621 83 84 City Zip Code 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 12, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change ☐ Addition TITLE **GLUCKIN, JOHN** NAME 1.2 NAME 3460 COUNTRYSIDE BLVD., #38 STREET ADDRESS 1.3 STREET ADDRESS **CLEARWATER FL 34621** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition Change TITLE 2.1 TITLE **Brumber**, Bonnie NAME 2.2 NAME 2526 SR 580 #714 2.3 STREET ADDRESS STREET ADDRESS **CLEARWATER FL 34621** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 6.1 TITLE 6.2 NAME NAME

FILED Apr 23 1998 8:00am Secretary of State



STREET ADDRESS
CITY-ST-ZIP

TITLE
DELETE
5.1 TITLE
DELETE
6.1 TITLE

Change
Addition

6.2 NAME
STREET ADDRESS
CITY-ST-ZIP

14. It 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 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 proporation or the ecceiver 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 own intrachment with an address.