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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P9400048513 (3)

OKEECHOBEE TOM'S SALES, INC.

| 2. Principal Place of Business 2a. Mailing Address 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State City & State 28 Zip Country Zip 25 9. Name and Address of Current Registered Agent ZELLER, JAY H III 120 SE 31ST LANE | Country 30 81 Name 82 Street Add | 3. Date incorporated or Qualified 06/29/1994 4. FEI Number 65-0513232 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for In Florida Statutes | \$8.75 A Fee Rec \$5.00 Added to ntangible tax under s. | plied For t Applicable additional quired May Be o Fees |
|--|-------------------------------------|--|---|---|
| 21 | 81 Name | 4. FEI Number 65-0513232 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for in Florida Statutes | \$8.75 A Fee Rec \$5.00 Added to ntangible tax under s. | t Applicable dditional quired May Be o Fees |
| Suite, Apt. #. etc. Suite, Apt. #. etc. City & State City & State Zip Country Zip 9. Name and Address of Current Registered Agent ZELLER, JAY H III 120 SE 31ST LANE | 81 Name | 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for in Florida Statutes | \$8.75 A Fee Red \$5.00 Added to ntangible tax under s. | dditional quired May Be o Fees |
| 22 | 81 Name | 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for In Florida Statutes | \$5.00 Added to ntangible tax under s. | quired May Be o Fees |
| 23 Zip Country Zip 24 25 29 9. Name and Address of Current Registered Agent ZELLER, JAY H III 120 SE 31ST LANE | 81 Name | Trust Fund Contribution 8. This corporation has liability for In Florida Statutes | Added to ntangible tax under s. Yes No | o Fees |
| Zip Country Zip 25 29 9. Name and Address of Current Registered Agent ZELLER, JAY H III 120 SE 31ST LANE | 81 Name | This corporation has liability for in Florida Statutes | ntangible tax under s. Yes \[\] No | |
| 9. Name and Address of Current Registered Agent ZELLER, JAY H III 120 SE 31ST LANE | 81 Name | Florida Statutes | Yes No | |
| ZELLER, JAY H III 120 SE 31ST LANE | | 10. Name and Address of New Re | gistered Agent | |
| 120 SE 31ST LANE | | | | |
| | 82 Street Add | | | |
| | | ress (P.O. Box Number is Not Acceptab | le) | *************************************** |
| OKEECHOBEE FL 34974 | | *************************************** | | |
| | 63 | | | |
| | 84 City | | FL 85 Zip C | Zode |
| | E: Registered Agent signature requi | red when reinstating) | DATE | |
| 12. OFFICERS AND DIRECTORS THE DELETE | 13. | ADDITIONS/CHANGES TO OFFIC | Change | Addition |
| 301100 MV H III | 1.1 TITLE | | crange | MODITION |
| 400 CE 04CT LANE | 1.2 NAME | | | |
| OVECHOPEE EL 24074 | 1 3 STREET ADDRESS | | | |
| CHY-SI-ZIP ORECONDEE PL 349/4 | 1.4 CITY-\$T-2IP | | Change | Addition |
| NAME: | 2.2 NAME | | | |
| STREET ADDRESS | 2.3 STREET ADDRESS | | • | |
| City - St - 70° | 2. 4 CITY - ST - ZIP | * m | a., | |
| TITLE DELETE | 3.1 TITLE | | ☐ Change | Addition |
| NAME | 3.2 NAME | | | |
| STHEET ADDRESS | 3.3 STREET ADDRESS | | | |
| CHY-ST-ZIF | 3.4. CITY - ST - ZIP | ALIEN TO THE STATE OF THE STATE | | 11.00 |
| FILE DELETE | 4.1 YITLE | | ☐ Change | Addition |
| NAME CONTROL OF THE C | 4. 2 NAME | | | |
| STREET ACORESS | 4.3 STREET ADDRESS | | | |
| CHY-SI-7/P | 4.4 CITY - ST - ZIP 5.1 TITLE | *************************************** | Change | Addition |
| NAME | 5.2 NAME | | onenge | |
| STREET ADDRESS | 5.3 STREET ADDRESS | | | |
| City - St - 7iP | 5.4 CITY-ST-ZIP | | | |
| THE DELETE | 6.1 TITLE | | ☐ Change | ☐ Addition |
| NAME | 6.2 NAME | | | |
| STREET ADDRESS | 6.3 STREET ADDRESS | | | |
| City - St - 7iP | 6.4 CITY - ST - ZIP | | | |
| 14. I do hereby certify that the information supplied with this filing does not qualifinformation indicated on this annual report or supplemental annual report is to | fy for the exemption state | d in Section 119.07(3)(i), Florida Statutes | s. I further certify that t | he |

SIGNATURE

Signature and word on Printed Name

MANY DELER THE S

3-27-97 Date 9 Y1-763-2562 Daytime Phone #

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Apr 02 1997 8:00am

Secretary of State