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

Mailing Address

PROFIT
CORPORATION
ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State -/
DIVISION OF CORPORATIONS

DOCUMENT # P95000023994 (3)

R & K FARM TECHNIQUES, INC.

1 FLORIDA PARK DRIVE NORTH 1 FLORIDA PARK DRIVE NORTH PALM COAST FL 32137 PALM COAST FL 32137-3857 3. Date Incorporated or Qualified 3a. Date of Last Report 03/24/1995 06/11/1996 2. Principal Place of Business 2a, Mailing Address Applied For 4. FEI Number 59-3313651 21 26 Not Applicable Sude, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 28 Trust Fund Contribution Ziti Country Country Zio This corporation has liability for in angible tax under s. 199.032, 30 Florida Statutes Y Yes ☐ No 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CITTLER, URSULA 1 FLORIDA PARK DRIVE NORTH 82 Street Address (P.O. Box Number is Not Acceptable) #203 PALM COAST FL 32137 **B3** 84 City Zip Code 11. Pursuaril 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 Strite of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) 12. DELETE Change Addition 1.1 TITLE TILE LUTHI, HEINZ NAMI: 1.2 NAME CR2E034 15 SUNRISE VILLAS LANE 1.3 STREET ADDRESS STREET ADDRESS PALM COAST FL 32137 CHY-ST-ZiP 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE WEHRLI. AUGUST 2.2 NAME NAME 15 SUNRISE VILLAS LANE 2.3 STREET ADDRESS STREET ADDRESS PALM COAST FL 32137 2.4 CITY-S1-ZIP City - St - ZiP Change K Addition DELETE 3.1 TITLE TITLE S 3.2 NAME NAME Ursula Gittler STREET ADDRESS 3.3 STREET ADDRESS 1 Florida Park Drive North, #203 3.4. CITY-ST-ZIP Palm Coast, FL 32137 CITY - ST- 7II Change DELETE Addition TITLE 4.1 TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STHEET ADDRESS 4.4 CITY-ST-ZIP 0:17 - S* - 20 Change DELETE Addition THE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP 011Y - \$1 - ZIF DELETE Change Addition 6.1 Till E THU 6.2 NAME NAVE 6.3 STREET ADDRESS STREET ADDRESS CHY-ST-ZIP 6.4 CITY-ST-ZIF 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Fiorida Statutes. I further certify that the information indicated on this annual report is 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

(Ursula Gittler) Jon 30-97

FILED Feb 11 1997 8:00am Secretary of State

