SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



Matin Hodores

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000082032 (0)

BAY TO BAY PRODUCE, INC.

L JARNARI, NA JOJEJ RJIM DOM KOM JOSEM GOJEJ 1888 JULI OGJEC HOK 1781 (897

FILED

Aug 05 1998 8:00am

Secretary of State

BAT TO BAT PRODUCE, INC.			I HARMARI MA KRIBI BININ BANI ARMI ARMI ARMI] 10 10 10 10 10 10 10 10
:				
Principal Place of Business	Mailing Address			
9228 HAMILTON HILL LANE 9228 HAMILTON HILL				
TEMPLE TERRACE FL 33637	TEMPLE TERRACE FL 3363	7	DO NOT WRITE IN THE	S SPACE
			3. Date Incorporated or Qualified	
:			10/23/1995	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		59-3344803	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				\$8.75 Additional
27			5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the cu	
24 25	- 	30	Personal Property Tax due June 30.	Yes
9, Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered	Agent
REEDY, MICHAEL CPA		81 Name	reial Starts Reductions	Inc
2130 WEST BRANDON BLVD. #202 82 Street Addres			ess (P.O. Box Number is Not Acceptable)	
BRANDON-FE 33511				
		03	136 Witaku Rd Lutz F	2 333 44
		84 Cilv		85 Zip Code
Pursuant to the provisions of sections 607,0502				
I office or registered shept, or both, in the State of Florida, Such change was authorized by the office or registered of directors. I hereby accept the appointment as registered.				
agent. I am familiar with, and accept the obligat	ions of, section 607.0505, Flo	rida Statutes.	-1.	22/5/
SIGNATURE FAILUK C	IM (NO) JK	TE: Registerey Agent signature requi	red when reinstating) DATE	03/10
12. OFFICERS AND		1 13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE D	DELETE	1.1 TITLE		Change Addition
NAME HODGES, NATHAN C		1.2 NAME		
STREET ADDRESS 9228 HAMILTON HILL LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP TEMPLE TERRACE FL 33637		1.4 CITY-ST-ZIP		
TITLE	DELETE	2 1 TITLE		Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2.4 CITY-ST-ZIP		
TITLE	DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE	DELETE	4.1 TITLE		Change Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4 4 CITY-ST-ZIP		
TITLE	DELETE	5.1 TITLE	0000026097 -08/06/9801068	Thange Addition
NAME		5.2 NAME	-08/06/9801068	U4 0
STREET ADDRESS		5.3 STREET ADDRESS	***550 . 00	
CITY-ST-ZIP		5.4 CITY-ST-ZIP		T
TITLE	DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		12
STREET ADDRESS		6.3 STREET ADDRESS		8.5
CITY-ST-ZIP 14 hereby certify that the information symplicit with the information symplicity with the information symplectic with the information symplect with the information symplectic with the information symplectic	this filing does not qualify for the	6.4 CITY-ST-ZIP	inn 119 07/3/i) Florida Statutae I further cortife	that the information
14. I 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 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.				