

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

FILED  
Sep 14 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000052546 (3)

1. Corporation Name

PAHOKEE MEATS, INC

Principal Place of Business

149 S LAKE AVE  
PAHOKEE FL 33476

Mailing Address

149 S LAKE AVE  
PAHOKEE FL 33476



DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

06/13/1997

4. FEI Number

65-0768328

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

KENNEDY, TERESA  
4216 W 10 LN  
HIALEAH FL 33012

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	KENNEDY, TERESA	
STREET ADDRESS	4216 W 10 LN	
CITY-ST-ZIP	HIALEAH FL 33012	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12


1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	PEDRO C. PEREZ
2.3 STREET ADDRESS	2997 BACOM PT. RD. # 36
2.4 CITY-ST-ZIP	PAHOKEE, FL. 33476
3.1 TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	ISABEL PEREZ
3.3 STREET ADDRESS	2997 BACOM PT. ROAD #36
3.4 CITY-ST-ZIP	PAHOKEE, FL. 33476
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	000002638800
5.3 STREET ADDRESS	-09/14/98--01134--008
5.4 CITY-ST-ZIP	***400.00
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	000002638800
6.3 STREET ADDRESS	-09/14/98--01134--007
6.4 CITY-ST-ZIP	***150.00

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.

CR2E034 (10/97)

TELEPHONE: (305) 442-8955  
(305) 447-8378  
FAX: (305) 447-8530

ARJONA, CABANAS & ASSOCIATES, P.A.  
ACCOUNTING, TAX PLANNING & PREPARATION  
LEJEUNE CENTRE  
782 N.W. LEJEUNE ROAD  
SUITE 637  
MIAMI, FLORIDA 33126

  
MEMBER OF  
NATIONAL SOCIETY OF PUBLIC ACCOUNTANTS  
FLORIDA ASSOCIATION OF INDEPENDENT ACCOUNTANTS

July 10, 1998

Division of Corporations  
Annual Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: Pahokee Meats, Inc.  
FEI: 65-0768328  
Form: 1998 Annual Report

Gentlemen:

We are the accountants for the above referenced taxpayer and the enclosed Annual Report has been forwarded to us for our consideration.

Please note that due to the nature of our client's business, they travel on a frequent basis and are were not in the area during the period the filing of the Annual Report was due. Furthermore, they have been looking to hire a bookkeeper to keep the company's books and records up to date due to unanticipated growth.

Enclosed please find a check for \$150 and a signed Annual Report for 1998. We respectfully request abatement of any penalties due to the aforementioned and the fact that the company pays all there taxes on a timely basis.

Should you have any questions, please do not hesitate to call me.

Sincerely,

  
Joseph F. Cabanas