PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000074513

1. Corporation Name

BEATY BROTHERS FARMS, INC.

Principal Place of Business Mailing Address 10000 TROTTERS LN 9200 NORTHWEST 68TH COURT PARKLAND FL 33067 PARKLAND FL 33067

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90120 017 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

08/25/1997

2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Apr	olied For
21	26				65-0778663	Not	Applicable
Suite, Apt.	iuite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A	
22 City & State					6. Election Campaign Financing	\$5.00	May Re
23					Trust Fund Contribution Added to Fees		
Zip	Country Zip Cour			<i>'</i>	8. This corporation owes the current year Inte		_
24	25 29 30				Personal Property Tax.		□No
	9. Name and Address of Current	Registered Agent	81		10. Name and Address of New Registered	Agent	
PODTIMO JOHN L POO				Name			
KORTHALS, JOHN L ESQ.				82 Street Address (P.O. Box Number is Not Acceptable)			
1401 EAST ATLANTIC BOULEVARD							
POMPANO BEACH FL 33060				83			
			84	City		85 Zip C	ode
•				1 - 4	FL		
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		13.		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	PD DELETE 1.1 T		1.1 TITLE			Change	☐ Addition
NAME	BEATY, STEPHEN W 1.2 N		1.2 NAME				1
STREET ADDRESS	REET ADDRESS 9200 NORTHWEST 68TH COURT 1.3 ST			TADDRESS			ļ.
CITY+ST-ZIP	PARKLAND FL 33067			IT-ZIP			
TITLE	VD DELETE 2.1 TI					☐ Change	☐ Addition
NAME	BEATY, JAMES D			ļ			Į.
STREET ADDRESS	TART MODELS WEST SOME TERRASE			TADDRESS			
CITY-ST-ZIP	DADI/I AND EL 00007			ST-ZIP			. 1
TITLE			3.1 TITLE			☐ Change	Addition -
NAME	3.2 N		3.2 NAME				}
STREET ADDRESS			3.3 STREE	TADORESS			
CITY-ST-ZIP			3,4. CITY-				
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				}
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP			4,4 CITY-S				
TITLE		[] DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				ł
STREET ADDRESS			5.3 STREE	TADDRESS			
CITY-ST-ZIP			5.4 CITY-5	T-ZIP			
TITLE		DELETE	6.1 TITLE			Change	☐ Addition
NAME		 =	6.2 NAME			-	İ
STREET ADDRESS			6.3 STREE	TADDRESS			
i			6.4 CITY-5				1
CITY-ST-ZNP			0.4 041 174				

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 people 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 rustee 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, ey or an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR