FILED

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000102733

1. Corporation Name

RECOGNIZED EXPERTS ON GRAS SUBSTANCES, INC.

Principal Place of Business Mailing Address 622 BEACHLAND BOULEVARD 622 BEACHLAND BOULEVARD						
			RD			
SUITE B SUITE B				DO NOT WRITE IN T	DO NOT WRITE IN THIS SPACE	
VERO BEACH FL 32963 VERO BEACH FL 32963				3. Date Incorporated or Qualifed	THO CITIOL	
				12/04/1997		
0.0: :-10	(Desirant	2a. Mailing Address		4. FEI Number	Applied For	
	lace of Business	 		65-0813055	Not Applicable	
21	# -4-	Suite, Apt. #, etc.			\$8.75 Additional	
Suite, Apt.	#, etc.	27 27 27 27 27 27 27 27 27 27 27 27 27 2	. 707	5. Certifcate of Status Desired	Fee Required	
City & State	2	City & State		6. Election Campaign Financing	\$5.00 May Be	
23	c	28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible	
24	25	⊢ `	30	Personal Property Tax.	☐ Yes ☐ No	
	9. Name and Address of Current			10. Name and Address of New Register	ed Agent	
			81 Name			
BURDOCK, GEORGE A				82 Street Address (P.O. Box Number is Not Acceptable)		
622 BEACHLAND BOULEVARD			oz Siree	82 Street Address (P.O. Box Number is Not Acceptable)		
SUIT	SUITE B					
VERO BEACH FL 32963						
			84 City	í	Zip Code	
agent. I a SIGNATURE	m familiar with, and accept le obligat	. True.		corporation submits this statement for the purposi- poration's board of directors. I hereby accept the ap 25% required when reinstating) DATE	rodgg_	
12.	OFFICERS ANI	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	BURDOCK, GEORGE A		1.2 NAME			
STREET ADDRESS	622 BEACHLAND BOULEVARD	, Suite B	1.3 STREET ADDRES	s l		
CITY-ST-ZIP	VERO BEACH FL 32963		1.4 CITY-ST-ZIP			
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRES	s		
CITY-ST-ZIP	مقدمه تتشيك شرتهم مجمعتني مقدنه وسيد		2.4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRES	s		
City-St-Zip	·		3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLÉ		☐ Change ☐ Addition	
NAME			4. 2 NAME			
STREET ADORESS	1		4.3 STREET ADDRES	s		
CITY-ST-ZIP	1		4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change Additi	
	,		5.2 NAME			

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, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

62 NAME

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE REQUIRED

DELETE

☐ Change

☐ Addition