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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9800026476

1. Corporation Name

Section Corporation Name

Prefronters, Inc.

FILED Apr 12, 1999 8:00 am Secretary of State

04-12-1999 90050 050 \*\*\*150.00

1. Corporation Name Edwards Beefmasters, Inc					
Principal Place of Business POPON 1587 QUINCY, FL 32353	Mailing Address POBOX QUINCY	.1587 ,FL 33353	DO NOT WRITE IN THI  3. Date Incorporated or Qualifed  3. 19.1998	IS SPACE	
Principal Place of Business	2a. Mailing Address		4. FEL Number 59.3501103	Applied For Not Applicable	
Suite, Apt. #, etc.  22  City & State	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	حي
23	City & State		6. Election Campaign Financing  Trust Fund Contribution	\$5.00 May Be	_
Zip Country	Zip	Country 30	This corporation owes the current year In Personal Property Tax.		
9. Name and Address of Cur			10. Name and Address of New Registered		
T M Qada	haida	81 Name	=======================================		
Jeff begenough		82 Street Addre	ess (P.O. Box Number is Not Acceptable)		
W O Great	30361	83			
Golney, Fi	C 29/201	84 City	FL	85 Zip Code	
11. Pursuant to the provisions of Sections 607.0 office or registered agent or both, in the Staggent I am familiar with and acceptage ob	0502 and 607.1508, Florida Statutes ate of Florida. Such change was aut tradigas of Section 607.0505. Florid	the above-named corporation to Statutes	oration submits this statement for the purpose on's board of directors. I hereby accept the appo	of changing its registered bintment as registered	
SIGNATURE			2 10	80	
			3-777		
		tegistered Agent signature required		<u></u>	œ
12. OFFICERS	AND DIRECTORS	13.	when reinstating)  ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12	1/98)
12. OFFICERS	AND DIRECTORS  DELETE	13. 1.1 TITLE		ND DIRECTORS IN 12	(11/98)
12. OFFICERS TITLE NAME EdwardS, Ow	AND DIRECTORS  DELETE  Significant Solomon Ro	13. 1.1 TITLE 1.2 NAME		IND DIRECTORS IN 12  Change Addition	034 (11/98)
12. OFFICERS TITLE NAME EdwardS, Own STREET ADDRESS PO BOX 1587	AND DIRECTORS  DELETE  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		ND DIRECTORS IN 12 ☐ Change ☐ Addition	ZEU34 (11/98)
12. OFFICERS TITLE NAME STREET ADDRESS CITY-ST-ZIP  OFFICERS  CHARACTERS  OFFICERS  OFFICERS  OFFICERS  OFFICERS  OFFICERS  OFFICERS	AND DIRECTORS  DELETE  STATE SOLOMOR RO  3353  AUGUSTA	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		ND DIRECTORS IN 12 Change Addition	CRZE034 (11/98)
12. OFFICERS  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  OFFICERS  OFFICERS  OFFICERS  OFFICERS  OFFICERS  OFFICERS  OFFICERS  OFFICERS	AND DIRECTORS  DELETE  STILL  STILL  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE		ND DIRECTORS IN 12 Change Addition Change Addition	CR2E034 (11/98)
12. OFFICERS  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  SAVE, EILY M.	AND DIRECTORS  DELETE  B34 Solomon Rd  3353 GonCy For  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME		ND DIRECTORS IN 12  Change Addition  Change Addition	CK2E034 (11/98)
12. OFFICERS  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  SAYE, EILY M.  STREET ADDRESS  CON 1587	AND DIRECTORS  DELETE  STILL  STILL  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		ND DIRECTORS IN 12 Change Addition Change Addition	CRZE034 (11/98)
12. OFFICERS  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  SAVE, EILY M.	AND DIRECTORS  DELETE  B34 Solomon Rd  3353 GonCy For  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME		ND DIRECTORS IN 12 Change Addition Change Addition Change Addition	CRZE034 (11/98)
12. OFFICERS  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  TITLE  OFFICERS  CHARACTERS  CHARACTERS  CONTROL  CONTRO	AND DIRECTORS  DELETE  B34 Solomon Rd  3353 GonCy For  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		Orlange (Charles)	CR2E034 (11/98)
12. OFFICERS  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  BEDENBAUGH, T.	AND DIRECTORS  DELETE  B34 Solomon Rd  3353 GonCy For  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE		Orlange (Charles)	CKZE034 (11/98)
12. OFFICERS  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  NAME  STREET ADDRESS  CITY-ST-ZIP  NAME  STREET ADDRESS  CITY-ST-ZIP  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	AND DIRECTORS  DELETE  34 Solomon Rd  353 335  DELETE  R12 Box 88A  R353 QUINCY FL  2353  DELETE	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME		Orlange (Charles)	CRZE034 (11/98)
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  REPENBAUGH, J  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  REPENBAUGH, J  TO GREENWOOD  D  TITLE  TIT	AND DIRECTORS  DELETE  B34 Solomon Rd  2353 335  DELETE  R12 B0188A  R353 Q01704 FL  DELETE  V.	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS		Orlange (Charles)	CR2E034 (11/98)
12. OFFICERS  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  REDENBAUGH, J.  STREET ADDRESS  CITY-ST-ZIP  QUINCY  F. 3	AND DIRECTORS  DELETE  34 Solomon Rd  353 335  DELETE  R12 Box 88A  R353 QUINCY FL  2353  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP		☐ Change ☐ Addition	CK2E034 (11/98)
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TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TI	AND DIRECTORS  DELETE  34 Solomon Rd  353 335  DELETE  R12 Box 88A  R353 QUINCY FL  2353  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4. CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE		☐ Change ☐ Addition	CK2E034 (11/98)
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TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	AND DIRECTORS  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4. CITY-ST-ZIP  4.1 TITLE  4. 2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP		☐ Change ☐ Addition ☐ Change ☐ Addition	
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14. I hereby certify that the information supplied with this filling 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.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING DESIGER OR DIRECTOR

8508758306