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Secretary of State

07-21-1999 90009 044 ***550.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000051216 ✓

1. Corporation Name

AMERICAN HARVESTING SYSTEMS, INC.

Principal Place of Business

1528 S.W. HIGHWAY 17
ARCADIA FL 34266

Mailing Address

1528 S.W. HIGHWAY 17
ARCADIA FL 34266

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/05/1998

4. FEI Number

Applied For

☒ Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation owes the current year intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

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9. Name and Address of Current Registered Agent

HUBBARD, STEVEN W
2080 MCGREGOR BOULEVARD, THIRD FLOOR
FORT MYERS FL 33901

10. Name and Address of New Registered Agent

81 Name Gregory B. Gaskins
82 Street Address (P.O. Box Number is Not Acceptable)
1528 Highway 17 South
83 Arcadia, Florida
84 City FL 85 Zip Code 34266

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 Gregory B. Gaskins

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

(NOTE: Registered Agent signature required when reinstating)

7/15/99

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETENAME Gregory B. Gaskins
STREET ADDRESS 1528 Highway 17 S.
CITY-ST-ZIP Arcadia, Florida 34266TITLE ☐ DELETENAME Patricia M. Gaskins
STREET ADDRESS 1528 Highway 17 South
CITY-ST-ZIP Arcadia, FL 34266TITLE ☐ DELETENAME Amy Gaskins
STREET ADDRESS 1528 Highway 17 South
CITY-ST-ZIP Arcadia, FL 34266TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE: Patricia M. Gaskins

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/15/99

Date

941-494-1222

Daytime Phone #

CR2E034 (11/98)