DW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

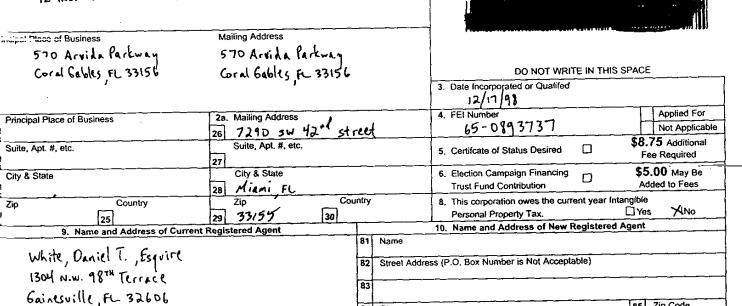
Secretary of State DIVISION OF CORPORATIONS

OCUMENT # P98000105247 V

PEARLS BEFORE SWINE ENTERPRISES, INC.

FILED Jun 01, 1999 8:00 am **Secretary of State**

06-01-1999 90035 002 ***150.00



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.

84

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SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Re	gistered Agent signature n	equired when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFF		
TILE		☐ DELETE	1.1 TITLE	PRESIDENT	☐ Change	Addition
IAME			1.2 NAME	KEVIN SMITH		1
TREET ADDRESS			1.3 STREET ADDRESS	570 ARVIDA PARKWAY		
aty-st-zip			1.4 CITY-ST-ZIP	COPAL GABLES, FL 33156		
TILE		☐ DELETE	2.1 TILE		Change	Addition
AME			2.2 NAME			•
	,		2.3 STREET ADDRESS	·		•
STREET ADDRESS			2.4 CITY+ST+ZIP			
TITLE	 	DELETE	3.1 TITLE		☐ Change	☐ Addition
			3.2 NAME			
iame 		•	3.3 STREET ADDRESS			[
STREET ADDRESS			3.4, CITY-ST-ZIP]
JTY-ST-ZIP		DELETE	4.1 TITLE		☐ Change	☐ Addition
TILE			4.2 NAME		:	
JAME			4.3 STREET ADDRESS			ĺ
STREET ADDRESS	S			}		ļ
CITY-ST-ZIP	 	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	 	☐ Change	☐ Addition
ME		[] Octobe	5.2 NAME			
NAME			5.3 STREET ADORESS	1		ĺ
STREET ADDRESS	s			İ	. ,	,
CITY-ST-ZIP	-,	C selecte	5.4 CITY-ST-ZIP 6.1 TITLE	}	☐ Change	Addition
TILE	•.	☐ DELETE	I .			
NAME			6.2 NAME			1
STREET ADORES	s		6.3 STREET ADDRESS			
			A 4 -4704 OF 780			

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 employered 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.

April 27, 1999 305-266-3388

Zip Code

85