2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000033504

1. Entity Name
BEKAH'S BEST PRODUCE, INC.

Principal Place of Business	Mailing Address
800 S BROCKSMITH RD FORT PIERCE, FL 34945	800 S BROCKSMITH RD FORT PIERCE, FL 34945

04102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0924328
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SHEUBROOKS, DIANA
800 S BROCKSMITH RD
FORT PIERCE, FL 34945

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SHEUBROOKS, JAMES E
STREET ADDRESS	800 S BROCKSMITH RD
CITY-ST-ZIP	FORT PIERCE, FL 34945
TITLE	ST
NAME	SHEUBROOKS, DIANA
STREET ADDRESS	800 S BROCKSMITH RD
CITY-ST-ZIP	FORT PIERCE, FL 34945
TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

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05/02/06-80080-023 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James E Sheubrooks 4/16/06 772-971-4011
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #