


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2004 8:00 am
Secretary of State

03-16-2004 90021 023 ***150.00

DOCUMENT # P99000071007 1. Entity Name PREMIER AGRITECH, INC.																													
Principal Place of Business 1524 GLENLAKE COVE NICEVILLE, FL 32578			Mailing Address 1524 GLENLAKE COVE NICEVILLE, FL 32578																										
2. Principal Place of Business 4540 Highway 20 E Suite, Apt. #, etc.		3. Mailing Address PO Box 5145 Suite, Apt. #, etc.																											
City & State Niceville, FL		City & State Niceville, FL		4. FEI Number 59-3609584																									
Zip 32578		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent KUETH, PETER W 1524 GLENLAKE COVE NICEVILLE, FL 32578			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____																										
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 _____ (NOTE: Registered Agent signature required when restate) DATE _____																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																										
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12. 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 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: _____			- President/CEO																										
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date 3/12/04 Daytime Phone # (850) 729-7733																										