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FILED

Jun 17 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S02904 (8)  
1. Corporation Name  
AGRICULTURAL DEVELOPMENT, INC.



Principal Place of Business

Mailing Address

160 WEST FLAGLER ST.  
SUITE 2701  
MIAMI FL 33131

150 WEST FLAGLER ST  
SUITE 2701  
MIAMI FL 33131

2. Principal Place of Business

2a. Mailing Address

21 100 SE 2nd Street

26 100 SE 2nd Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Nationsbank, #3700

27 Nationsbank, #3700

City & State

City & State

23 Miami, FL

28 Miami, FL

Zip Country

Zip Country

24 33131

29 33131

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

09/28/1990

3a. Date of Last Report

07/16/1996

4. FEI Number

65-0240215

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

BEFELER, GEORGE ESQ  
160 WEST FLAGLER ST  
SUITE 2701  
MIAMI FL 33131

81 Name

George BeFeler, Esq.

82 Street Address (P.O. Box Number is Not Acceptable)

Nationsbank, #3700

83

100 SE 2nd Street

84

City

Miami

FL

85 Zip Code

33131

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DUTARI, GRACIELA S  
CALLE AQUILINO DE LA GUARDIA NO. 8  
EDIFICIO IGRA PANAMA FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do 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.

CR2E034 (9/96)