7237

ANNUAL REPORT



FILED May 02, 2000 8:00 am Secretary of State

ANNOAL BEFORE		尼亚尼亚	Secretary or State
2000		Con WE	DIVISION OF CORPORATIONS
	Board Motion on	d Instructions on Other Cide Del	ene Atelian Estas

Filing Fee of \$35 Required - Make Checks Payable To: Secretary of State

Name and Address of Corporation Principal Office:		2.
1.	or the corporation can be changed only by filing an amendment.	
DOCUMENT # S 9056/	Street Address 21	
DILLMAN FARMS INC.		211 ROYAL POINCIANA WAY SUITE
500 SOUTH AUSTRALIAN AVENUE		P.O. Box No. 22
SUITE 110		City and State 23
WEST PALM BEACH, FL 33401		
<u> </u>		PALM BEACH, FI. Zip Code 24
If above address is incorrect in any war in item 2. Include Zip Code.	ay, enter the correct address	33480
3. Date Incorporated or Qualified 10/29/1991 To Do Business in Florida	4. FEI Number 65 030253	66 ☐ FEI Number Applied For ☐ FEI Number Not Applicable
6. Names and Street Addresses of Each Officer and Director	or (Do not use any correction tape or fluid to cover	over incorrect information.)
Title Names of Officers and Directors	Street Address of Each Officer and Director 3 (Do NOT Use Post Office Box Nur	City and State mbers) 4 5
D HARALD DUDE	_211 Royal Poinciana	,
		6000032831764
	,	-06/09/0001084008 ***1270.00 ****150.00
		·
DECISTEDED ACENT INFORM	IATION	Name and Address of New Registered Agent
REGISTERED AGENT INFORM 7. Name and Address of Current Register		
HARALD DUDE		o NOT Use P.O. Box Number) 82
211 Royal Poinciana Way Suit Palm Beach, FL 33480	te A Street Address 2 (D	o NOT Use P.O. Box Number) 83
	City and State 84	Zip Code 85
Pursuant to the provisions of Sections 607.034 and 607.03 for the purpose of changing its registered office or registered.	67, Florida Statutes, the above-named corporation, inco agent, or both, in the State of Florida.	orporated under the laws of the State of Florida, submits this statement
for the purpose of changing its registered office or registered a Such change was authorized by resolution duly adopted by it I hereby accept the appointment of registered agent. I am fam	s board of directors on:	925 FS
DOOVE	mar mm, and accept the congenions of, accinots covice	
SIGNATURE (Registered Agent Accepting Appointment	nl)	DATE
I certify that the information indicated on this annual report under oath. I further certify that I am an officer or director of the control of the certify that I am an officer or director of the certify that I am an officer or director of the certify that I am an officer or director of the certification.	rt or supplemental annual report is true and accurate ne corporation or the receiver or trustee empowered to	and that my signature shall have the same legal effects as if made execute this report as required by Chapter 607, F.S.
Signature	HAPALD DUDE, PRES	IDENT Date 4/20/2000
Typed Name of Signing Officer of Director HA AJOD DUDE	Tille president	Telephone Number 561 833 4433
11. Should you desire a certificate of status check the box.	OFFICIATE OF OVATURE RESIDES	\$5 Additional Fee