

20 Feb. 15. 2002 1:05 PM BUSINESS REPORT (UBR)

FILED
Apr 03, 2002 8:00 am
Secretary of State

04-03-2002 90033 042 ***150.00

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1. Entity Name

LATIN AMERICAN AGRIBUSINESS DEVELOPMENT CORPORATION

Principal Place of Business

520 BRICKELL KEY DR.
 SUITE 305
 MIAMI FL 33131

Mailing Address

520 BRICKELL KEY DR.
 SUITE 305
 MIAMI FL 33131

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **13-2662873**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

FREEMAN, STEPHEN A.
520 BRICKELL KEY DRIVE
SUITE 305
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

B. 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☐
 (See criteria on back)

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	FERNANDEZ, BENJAMIN	
STREET ADDRESS	520 BRICKELL KEY DRIVE	
CITY-ST-ZIP	MIAMI FL	
TITLE	VP	☐ Delete
NAME	ALVAREZ, OSCAR	
STREET ADDRESS	520 BRICKELL KEY DR	
CITY-ST-ZIP	MIAMI FL	
TITLE	C	☒ Delete
NAME	SCHUMACHER, JUERGEN	
STREET ADDRESS	DEL SUPERMERCADO YAOHAN	
CITY-ST-ZIP	SAN JOSE, COSTA RICA	
TITLE	D	☐ Delete
NAME	BILBAO, GUILLERMO G	
STREET ADDRESS	245 PARK AVENUE	
CITY-ST-ZIP	NEW YORK NY 10167	
TITLE	D	☒ Delete
NAME	ROBLES, RICARDO	
STREET ADDRESS	520 BRICKELL KEY DRIVE	
CITY-ST-ZIP	MIAMI FL	
TITLE	C	☐ Delete
NAME	BENITEZ, DAISY	
STREET ADDRESS	520 BRICKELL KEY DR	
CITY-ST-ZIP	MIAMI FL	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daisy Benitez
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/02

305.445.1341

Date

Daytime Phone #

CH2E034 (9/01)