2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address

SIGNATURE:

th all other like empowered.

Apr 18, 2000 8:00 am Secretary of State **DOCUMENT # M13960** 1. Entity Name SUNLIGHT FOODS, INC. 04-18-2000 90179 036 ***150.00 Mailing Address Principal Place of Business 3550 N.W. 112 STREET 3550 N.W. 112 STREET MIAMI FL 33167 MIAMI FL 33167-3317 638565 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2523721 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SCHULTZ, STEVEN ESQ. Street Address (P.O. Box Number is Not Acceptable) 200 SOUTH BISCAYNE BLVD. **SUITE 2150 MIAMI FL 33131** Zip Code City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11, ☐ Charge Addition Delete TITLE TITLE GREEN, WILLIAM NAME NAME STREET ADDRESS STREET ADDRESS 9418 W. BROADVIEW DR CITY-ST-ZIP CITY-ST-ZIP **BAY HARBOR FL** ☐ Change Addition ☐ Delete TITLE TITLE CONTENTO, ROBERT NAME NAME STREET ADDRESS STREET ADDRESS 3410 GALT OCEAN DRIVE CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL Change ☐ Addition Delete TITLE GREEN, ARTHUR NAME NAME STREET ADDRESS STREET ADDRESS 2800 ISLAND BLVD, #2801 CITY-ST-ZIP CITY-ST-ZIP WILLIAMS ISLAND FL Change Addition Delete TIBE GREEN, CAROLE NAME STREET ADDRESS 2800 ISLAND BLVD #2801 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP WILLIAMS ISLAND FL ☐ Change Addition ☐ Delete TITLE TITLE NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Detete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 eath; 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