

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004840

Entity Name: MASTRONARDI PRODUCE-USA, INC.

Current Principal Place of Business:

28700 PLYMOUTH ROAD
LIVONIA, MI 48150-2336

Current Mailing Address:

28700 PLYMOUTH ROAD
LIVONIA, MI 48150-2336

FEI Number: 20-3902640

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name MASTRONARDI, PAUL
Address 28700 PLYMOUTH ROAD
City-State-Zip: LIVONIA MI 48150

Title DST
Name SAFRANCE, MARNE
Address 28700 PLYMOUTH ROAD
City-State-Zip: LIVONIA MI 48150

Title COO
Name SAFRANCE, KEVIN
Address 28700 PLYMOUTH ROAD
City-State-Zip: LIVONIA MI 48150

Title CFO
Name ATTRIDGE, STEVE
Address 28700 PLYMOUTH ROAD
City-State-Zip: LIVONIA MI 48150

Title CTRL
Name OBRIEN, AVEC G
Address 28700 PLYMOUTH ROAD
City-State-Zip: LIVONIA MI 48150

Title CHRM
Name MASTRONARDI, DON
Address 28700 PLYMOUTH ROAD
City-State-Zip: LIVONIA MI 48150

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: AVEC G OBRIEN

**CONTROLLER US AND
MEXICO**

03/14/2016

Electronic Signature of Signing Officer/Director Detail

Date