

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 241803

1. Entity Name

CARNIVAL FRUIT COMPANY

FILED
Apr 20, 2000 8:00 am
Secretary of State

04-20-2000 90072 006 ***150.00

Principal Place of Business
475 NE 185TH ST.
NORTH MIAMI BEACH FL 33179

Mailing Address
15305 DALAS PKWY
STE 1010- ATTN: STACY KOHN
DALLAS TX 75248
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

ADDISON TX

4. FEI Number 59-0912477

Applied For

Not Applicable

Zip

Country

Zip

Country

75001

US

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPRITZ, ALLEN H
475 NE 185TH STR
8801 EXCHANGE DR.
N MIAMI FL 33179

Name

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

City

FL

Zip Code

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

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☐ Delete
NAME ALAN H. SPRITZ
STREET ADDRESS 475 N.E. 185TH ST
CITY-ST-ZIP N.MIAMI BCH FL 33179

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

TITLE D ☐ Delete
NAME PARKER, MITT
STREET ADDRESS 15305 DALLAS PKWY- STE 1010
CITY-ST-ZIP DALLAS TX 75248

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP ADDISON TX 75001

TITLE AS ☐ Delete
NAME KRUK, BERNADETTE M
STREET ADDRESS 15305 DALLAS PKWY- STE 1010
CITY-ST-ZIP DALLAS TX 75248

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP ADDISON TX 75001

TITLE VASD ☐ Delete
NAME STRUGEON, BRIAN
STREET ADDRESS 15305 DALLAS PKWY- STE 1010
CITY-ST-ZIP DALLAS TX 75248

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP ADDISON TX 75001

TITLE TS ☒ Delete
NAME MCCLENDON, MARK
STREET ADDRESS 16 FOREST PKWY BLDG H
CITY-ST-ZIP FOREST PARK GA 30297

TITLE ☐ Change ☒ Addition
NAME ST
STREET ADDRESS EDUARDO SOLANA
CITY-ST-ZIP 1245 N.W. 21ST STREET MIAMI FL 33142

TITLE ☐ Delete
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)