2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # 334768** Feb 15, 2000 8:00 am **Secretary of State** SUNRISE NATURAL FOODS, INC. 02-15-2000 90059 025 ***150.00 Principal Place of Business Mailing Address -251-ROYAL-PALM-WAY---251 ROYAL PALM WAY----C/O MENDOZA:CALLAS&SCHILLING:POB 2715 C/O MENDOZA:CALLAS&SCHILLING:POB 2715 PALM BEACH PC 33480-4300 PAUM BEACH FL 33480 2. Principal Place of Business 3. Mailing Address c/o Mendoza and Callas c/o Mendoza and Callas Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. P. O. Box 2715 251 Royal Palm Way, Ste 602 Applied For City & State 4. FEI Number City & State 59-1280928 Not Applicable Palm Beach, FL Palm Beach, FL Country USA \$8.75 Additional Country 33480 5. Certificate of Status Desired 33480 USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent de Mendoza, III MENDOZA - CALLAS & SCHILLING Street Address (P.O. Box Number is Not Acceptable) C/O Mendoza and Callas 251-ROYAL PALM-WAY, 6-FL PALM BEACH FL 33480-1310 251 Royal Palm Way, Suite 602 ^{Zi}33480 Palm Beach 8. The above named entity sports this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Mario G. de Mendoza, III, Reg. Agt SIGNATURE (NOTE: Registered Agent signature required when reinstating) 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 Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE Change ☐ Addition PDT TITLE ☐ Delete NAME NAME WELFELD, ANN A STREET ADDRESS STREET ADDRESS 251 ROYAL PALM WAY CITY-ST-ZIP CITY-ST-7IP PALM BEACH FL ☐ Addition ☐ Change TITLE ☐ Delete TITLE WELFELD, MARVIN J JR. NAME NAME STREET ADDRESS STREET ADDRESS 251 ROYAL PALM WAY CITY-ST-ZIP CITY-ST-ZIP PALM BEACH FL ☐ Change ☐ Addition TITLE Delete TITLE NAME DE MENDOZA, MARIO G'III NAME STREET ADDRESS STREET ADDRESS 251 ROYAL PALM WAY CITY-ST-ZIP CITY-ST-ZIP PALM BEACH FL ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Change ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STREET ADDRESS

CITY-ST-ZIP

Ann A. Welfeld, Pres. 2

(561) 655-3557

Daytime Phone #