FILED 2001 UNIFORM BUSINESS REPORT (UBR) Mar 15, 2001 8:00 am **DOCUMENT # 538590 Secretary of State** 1. Entity Name 03-15-2001 90013 001 ***150.00 EAST COAST FRUIT COMPANY, INC. Principal Place of Business Mailing Address 3335 EDGEWOOD AVE. P.O. BOX 551260 JACKSONVILLE FL 32205 JACKSONVILLE FL 32255 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1746799 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required... 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SCHNEIDER, MICHAEL N. Street Address (P.O. Box Number is Not Acceptable) 5150 BELFORT ROAD **BLDG 100** JACKSONVILLE FL 32256 City Zip Code FL 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. Portnoy, Jerry B CR2E034 (10/00) TITLE ☐ Delete TITLE ☐ Addition PORTNOY, JERRY NAME NAME 3335 N. EDGEWOOD AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL chairman of Board/D Portney, Goldie Change Delete TITLE TITLE PORTNOY, GOLDIE NAME NAME STREET ADDRESS STREET ADDRESS 2823 EVERCHARM PLACE CITY-SI-7IP ---CITY-ST-ZIP JACKSONVILLE FL-TITLE TITLE **⊠** Change ☐ Delete ☐ Addition spacher, Lewis ANSBACHER, LEWIS NAME NAME STREET ADDRESS 5150 BELFORT ROAD #100 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32256 ASSINK, Richard S. TITLE TITLE ☐ Delete ☐ Addition PASSINK, RICHARD S. NAME NAME STREET ADDRESS STREET ADDRESS 3335 N. EDGEWOOD AVE. CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL TAS chneider, Michael ☐ Delete ☐ Addition TITLE SCHNEIDER, MICHAEL NAME NAME STREET ADDRESS 5150 BELFORT ROAD #100 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP JACKSONVILLE FL 32256 Director TITLE Add TITLE ☐ Change Addition Passink Rhonda 3335 N. Edgewood Ave. Jacksonville, FC 3 Portnoy, NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP

ed with this filing thes not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information eport 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 a smooth of the same legal effect as if made under oath; that I am an officer or director a smooth of the same legal effect as if made under oath; that I am an officer or director as smooth of the same legal effect as if made under oath; that I am an officer or director and smooth of the same legal effect as if made under oath; that I am an officer or director and smooth of the same legal effect as if made under oath; that I am an officer or director and smooth of the same legal effect as if made under oath; that I am an officer or director and smooth of the same legal effect as if made under oath; that I am an officer or director and smooth of the same legal effect as if made under oath; that I am an officer or director and smooth of the same legal effect as if made under oath; that I am an officer or director as smooth of the same legal effect as if made under oath; that I am an officer or director and smooth of the same legal effect as if made under oath; that I am an officer or director and smooth of the same legal effect as if made under oath; that I am an officer or director and smooth of the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect 13. I hereby certify that the information suppl indicated on this report or supplemental of the corporation or the receiver or trust changed, or on an attachment with an at

SIGNATURE:

NTED NAME OF SIGNING OFFICER OR DIRECTOR