

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 663385

1. Entity Name

HERMAN WALKER TOMATO COMPANY, INC.



FILED
Sep 15, 2000 8:00 am
Secretary of State

09-15-2000 90013 039 ***550.00

Principal Place of Business

P O BOX DRAWER 308
HOMESTEAD FL 33030

Mailing Address

P O BOX DRAWER 308
HOMESTEAD FL 33030

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1955139

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TILSON, THOMAS, A. ESQUIRE
1310 N. KROME AVE.
HOMESTEAD FL 33030

7. Name and Address of New Registered Agent

Name

CHARLES R. ROWE

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

1310 North Krome Avenue

City

Homestead

FL

Zip Code

33030

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 of registered agent or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9-11-00

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

TITLE PD ☐ Delete
NAME BOREK, ROBERT K.
STREET ADDRESS 23550 S.W. 153 AVENUE
CITY-ST-ZIP HOMESTEAD FL

TITLE D ☐ Delete
NAME BUCHANAN, NANCY
STREET ADDRESS 19525 S.W. 248TH STREET
CITY-ST-ZIP HOMESTEAD FL 33031

TITLE STD ☐ Delete
NAME BUCHANAN, WINSTON
STREET ADDRESS 19525 S.W. 248TH STREET
CITY-ST-ZIP HOMESTEAD FL 33031

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
NAME
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TITLE ☐ Change ☐ Addition
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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:

Robert K. Borek Pres 9-11-00 (705) 242 8921

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)