

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90041 011 ***150.00

DOCUMENT # 840549

1. Corporation Name
SEMINIS, INC.

Principal Place of Business
2901 NORTH VENTURA RD.
SUITE 250
OXNORD CA 93030
US

Mailing Address
2901 N. VENTURA ROAD
SUITE 250
OXNORD CA 93007
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

04/27/1978

4. FEI Number

36-0769130

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE C
NAME GARZA, ALFONSO R
STREET ADDRESS 300 ROBLE AVE.
CITY-ST-ZIP MONTERREY MX

TITLE PD
NAME SEBASTIA, FRANCISCO G
STREET ADDRESS 2750 PTE AVE.
CITY-ST-ZIP MONTERREY MX

TITLE D
NAME BARRERA, BERNARDO J
STREET ADDRESS 300 ROBLE AVE.
CITY-ST-ZIP MONTERREY MX

TITLE TS
NAME KELBERG, HOWARD S
STREET ADDRESS ONE BATTERY PARK PLAZA
CITY-ST-ZIP NEW YORK NY 10004

TITLE V
NAME JAMES M LARKIN
STREET ADDRESS 2901 N VENTURA RD #250
CITY-ST-ZIP OXNORD CA 93030

TITLE V
NAME LAWRENCE E O'NEAL
STREET ADDRESS 2901 N VENTURA RD #250
CITY-ST-ZIP OXNORD CA 93030

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME ROND-GARZA, ALFONSO
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME GONZALEZ-SEBASTIA, FRANCISCO
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME JIMENEZ-BARRERA, BERNARDO
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP OXNARD CA 93030

6.1 TITLE ☒ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP OXNARD CA 93030

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

LAWRENCE E. O'NEAL VICE PRESIDENT

1-11-99

Date

(805) 659-7445

Daytime Phone #

CR2E034 (11/98)