


# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0020825 MB

<b>DOCUMENT #</b> <span style="font-size: 1.2em;">A29442</span> 1. Entity Name <b>BASIC VEGETABLE PRODUCTS, LIMITED PARTNERSHIP</b>	
---	---

FILED

03 MAY -7 PM 1:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business 2999 OAK ROAD, SUITE 400 WALNUT CREEK CA 95496-2016	Mailing Address 2999 OAK ROAD, SUITE 400 WALNUT CREEK CA 95496-2016
---	---

2. Principal Place of Business	3. Mailing Address			<b>DUE BY MAY 1, 2003</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.			
City & State	City & State	4. FEI Number <b>77-0235300</b>		Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**C T CORPORATION SYSTEM**  
 1200 S. PINE ISLAND ROAD  
 PLANTATION FL 33324

**7. Name and Address of New Registered Agent**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

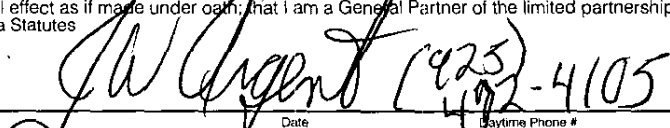
9. Capital Contributions as Shown on record. <b>\$108,214.00</b>	10. Amount of Capital Contributions in FLORIDA to date. <b>0</b>	<b>11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION</b>
--	--	--

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
 NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P27572	STREET ADDRESS	
NAME	BVP, INC.	CITY-ST-ZIP	
STREET ADDRESS	2999 OAK ROAD, STE. 400	STREET ADDRESS	300018446929
CITY-ST-ZIP	WALNUT CREEK CA 94596-2016	CITY-ST-ZIP	05/07/03--01032--003 **141.25
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b) Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

**SIGNATURE:** \_\_\_\_\_ **SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

 (925) 4105  
 Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

STAPLE CHECK HERE

CR2E003 (10/02)