## **2001 UNIFORM BUSINESS REPORT (UBR) FILED** Feb 26, 2001 08:00 AM DOCUMENT# A9700002426 **Secretary of State** PATRIOT FARMS, LIMITED PARTNERSHIP Principal Place of Business Mailing Address 1645 PALM BEACH LAKES BLVD., SUITE 1200 1645 PALM BEACH LAKES BLVD., SUITE 1200 WEST PALM BEACH WEST PALM BEACH 33401 2. Principal Place of Business 3. Mailing Address 2696 SW 96TH STREET 2696 SW 96TH STREET Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0792266 STUART STUART Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 34997 34007 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FARACH MANUEL Street Address (P.O. Box Number is Not Acceptable) 1645 PALM BEACH LAKES BLVD., SUITE 1200 WEST PALM BEACH FL33401 US Zip Code City 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. 02/26/2001 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Capital Contributions 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO DEPT. OF STATE 7,500.00 as Shown on record. in FLORIDA to date. 7,500.00 SEE REVERSE SIDE FOR FEE INFORMATION 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 ADDRESS CHANGES ONLY CR2E003 (11/00) DOCUMENT # STREET ADDRESS 2696 S.W. 96TH STREET PATRIOT FARMS, INC. NAME STREET ADDRESS 2696 S.W. 9TH AVENUE CITY-ST-ZIP STHART FL. 34997 CITY-ST-ZIP STUART FL 34994 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT# STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS 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)(i), 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

02/26/2001

Davtime Phone #

SIGNATURE: Patriot Farms, Inc.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER