

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000002709

1. Entity Name

ECOSCIENCE PRODUCE SYSTEMS CORP.

FILED
May 03, 2000 8:00 am
Secretary of State

05-03-2000 90031 041 ***150.00

Principal Place of Business

4300 L.B. MCLEOD ROAD
SUITE C
ORLANDO FL 32811
US

Mailing Address

P. O. BOX 3228
ORLANDO FL 32802-3228
US

2. Principal Place of Business

153 Sabal Palm Drive
Suite, Apt. #, etc.

3. Mailing Address

153 Sabal Palm Drive
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Longwood FL

City & State

Longwood FL

4. FEI Number

62-1567091

Applied For

Not Applicable

Zip

32779

Country

US

Zip

32779

Country

US

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STORY, DIRK D
4300-C L B MCLEOD ROAD
ORLANDO FL 32811

Name

Lucie Grant

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

153 Sabal Palm Drive

City

Longwood

FL

Zip Code

32779

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

Lucie Grant

4/24/00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
STORY, DIRK D.
4300-C L.B. MCLEOD RD
ORLANDO FL 32811 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Senior VP, CFO
Kenneth Hollander
10 Alvin Court
East Brunswick NJ 08816 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
RYAN, DAVID
10 ALVIN COURT
E BRUNSWICK NJ ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Senior VP
David Holwinski
10 Alvin Court
East Brunswick NJ 08816 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
DEGIGLIO, MICHAEL
10 ALVIN COURT
E BRUNSWICK NJ ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
JOANNIDI, HAROLD A
10 ALVIN COURT
E BRUNSWICK NJ ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/00 732-432-8200

Date

Daytime Phone #

CR2E034 (9/99)