2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 28, 2001 8:00 am DOCUMENT # F94000002709 Secretary of State 1. Entity Name ECOSCIENCE PRODUCE SYSTEMS CORP. 02-28-2001 90009 007 ***150.00 Principal Place of Business Mailing Address 153 SABAL PALM DRIVE 153 SABAL PALM DRIVE LONGWOOD FL 32779 LONGWOOD FL 32779 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 62-1567091 Not Applicable Zip _ Country Country **\$8.75** Additional___ 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **GRANT, LUCIE** Street Address (P.O. Box Number is Not Acceptable) 153 SABAL PALM DRIVE LONGWOOD FL 32779 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. Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE ☐ Addition NAME HOLLANDER, KENNETH NAME 17 Christopher Way Estontown NJ 07724 STREET ADDRESS STREET ADDRESS 10 ALVIN CT CITY-ST-ZIP CITY-ST-ZIP EAST_BRUNSWICK_NJ_08816 TITLE Delete TITLE Change ☐ Addition NAME NAME HOLEWINSKI, DAVID Estontoun NJ 07724 STREET ADDRESS STREET ADDRESS-10-ALVIN CT: ~-==-CITY-ST-ZIP CITY-ST-ZIP EAST_BRUNSWICK NJ 08816 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME DEGIGLIO, MICHAEL 17 Christopher way Extentem NI 07724 STREET ADDRESS STREET ADDRESS 10 ALVIN COURT CITY-ST-ZIP CITY-ST-7IP E BRUNSWICK NJ ☐ Addition TITLE ☐ Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

SIGNATURE AND TYP

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. Z/13/01 732-676-3000

Date Daytime Phone #