

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000003537

1. Entity Name  
PLANTATION MEDICINALS, INC.

**FILED**  
**Apr 26, 2001 8:00 am**  
**Secretary of State**

04-26-2001 90252 029 \*\*\*158.75

Principal Place of Business  
1401 COUNTY RD 830  
LOOP ROAD AT THE DIKE  
FELDA FL 33930  
US

Mailing Address  
P O BOX 128  
LOOP ROAD AT THE DIKE  
FELDA FL 33930  
US

2. Principal Place of Business  
1401 C.R. 830  
Suite, Apt. #, etc.

3. Mailing Address  
P.O. Box 128  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State  
Felda, FL 33930  
Zip  
33930  
Country  
USA

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Felda, FL 33930  
Zip  
33930  
Country  
USA

4. FEI Number 65-0421097  
Applicable For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
HUFFMAN, EVA  
1401 COUNTY ROAD 830  
FELDA FL 33930

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
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.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) 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, 2001 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

TITLE	C	<input checked="" type="checkbox"/> Delete
NAME	BONACORSI, DARIO	
STREET ADDRESS	VIA RIPAMONTI 99	
CITY-ST-ZIP	20141 MILAN, ITALY	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GIORGETTI, DR. LUCA	
STREET ADDRESS	VIA RIPAMONTI 99	
CITY-ST-ZIP	20141 MILAN, ITALY	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	COCIANCICH, ERMANNO	
STREET ADDRESS	VIA RIPAMONTI 99	
CITY-ST-ZIP	20141 MILAN, ITALY	
TITLE	DP	<input type="checkbox"/> Delete
NAME	HUFFMAN, MARLIN	
STREET ADDRESS	1401 COUNTY ROAD 830	
CITY-ST-ZIP	FELDA FL 33930	
TITLE	DV	<input type="checkbox"/> Delete
NAME	HUFFMAN, MICHAEL	
STREET ADDRESS	1401 COUNTY ROAD 830	
CITY-ST-ZIP	FELDA FL 33930	
TITLE	ST	<input type="checkbox"/> Delete
NAME	HUFFMAN, EVA	
STREET ADDRESS	1401 COUNTY ROAD 830	
CITY-ST-ZIP	FELDA FL 33930	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Co-C, D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Huffman, Marlin	
STREET ADDRESS	1401 C.R. 830	
CITY-ST-ZIP	Felda, FL 33930	
TITLE	CPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Huffman, Michael	
STREET ADDRESS	1401 C.R. 830	
CITY-ST-ZIP	Felda, FL 33930	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Brennan, Daniel	
STREET ADDRESS	1401 C.R. 830	
CITY-ST-ZIP	Felda, FL 33930	

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.

STATEMENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/01

Date

(863) 675-2984

Daytime Phone #

CR2E034 (10/00)