

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0158878 IN

DOCUMENT # F96000001798



FILED

03 SEP 22 AM 9:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☐ CHECK HERE IF MAKING CHANGES

03

1. Entity Name

CLEARWATER FINE FOODS (USA) INC.

Principal Place of Business

757 BEDFORD HIGHWAY
BEDFORD, NOVA SCOTIA B4A 3Z7
CD

Mailing Address

757 BEDFORD HIGHWAY
BEDFORD, NOVA SCOTIA B4A 3Z7
CD

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

51-0373449

Applied For

Not Applicable

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CPD
NAME RISLEY, JOHN ☐ Delete
STREET ADDRESS C/O 757 BEDFORD HIGHWAY
CITY-ST-ZIP BEDFORD, NOVA SCOTIA

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

TITLE VP
NAME MAGNUS, J M ☐ Delete
STREET ADDRESS C/O 757 BEDFORD HIGHWAY
CITY-ST-ZIP BEDFORD, NOVA SCOTIA

TITLE ☐ Change ☐ Addition
NAME 200023358448
STREET ADDRESS 03/26/03--01018--028 **550.00
CITY-ST-ZIP

TITLE S
NAME ARENAULT, GREG ☐ Delete
STREET ADDRESS C/O 757 BEDFORD HIGHWAY
CITY-ST-ZIP BEDFORD, NOVA SCOTIA

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

TITLE T
NAME HAWKINS, JAJES A ☐ Delete
STREET ADDRESS C/O 757 BEDFORD HIGHWAY
CITY-ST-ZIP BEDFORD, NOVA SCOTIA

TITLE ☒ Change ☐ Addition
NAME Hawkins, James A
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME MACDONALD, COLIN ☐ Delete
STREET ADDRESS C/O 757 BEDFORD HIGHWAY
CITY-ST-ZIP BEDFORD, NOVA SCOTIA

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Sept 8/03

Date

Daytime Phone #

CR2E034 (4/03)