


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2006 8:00 am
Secretary of State

01-24-2006 90009 020 ***158.75

DOCUMENT # J68370 1. Entity Name UNIGRO, U.S.A., INC.	
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Principal Place of Business 15330 LBJ FWY. STE. 418 MESQUITE, TX 75150 US	Mailing Address P.O. BOX 496029 GARLAND, TX 75049-6029 US
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01122006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2814304	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent DOYLE, PATRICK W. 800 WEST MORSE BLVD., SUITE 1 WINTER PARK, FL 32789
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**DO NOT WRITE
IN THIS SPACE**

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 re-registering)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ALBADA- JELGERSMA, ERIC OUDE GRACHT 182 BRASSCHAAT, BELGIUM, B2930
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD ALBADA-JELGERSMA, FRITS 15330 LBJ FWY., #418 MESQUITE, TX 75150
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MACKAY, JOHN D. L. 650 W GEORGIA ST 21ST FLOOR VANCOUVER, BC V6B 4N7
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS SAUNDERS, RODERICK G. 650 W GEORGIA ST 21ST FLOOR VANCOUVER, BC V6B 4N7
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

F. Albada Jelgersma - F. ALBADA JELGERSMA 1-27-06 972-698-9877