

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

200

FILED
Mar 28, 2003 8:00 am
Secretary of State

03-28-2003 90110 003 ***150.00

DOCUMENT # M 19468

1. Entity Name

FUNDORA PRODUCE CORPORATION



DO NOT WRITE IN THIS SPACE

90063498

2. Principal Place of Business

520 S.W. 13 avenue

3. Mailing Address

520 S.W. 13 AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

4. FEI Number

59-2570502

Applied For

Not Applicable

Zip

Country

33135-3949

Zip

Country

33135-3949

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

FUNDORA PEDRO

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

520 S.W. 13 AVENUE

City

MIAMI

FL

Zip Code

33135-3949

**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 reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE PT
NAME FUNDORA PEDRO
STREET ADDRESS 520 S.W. 13 AVENUE
CITY-ST-ZIP MIAMI, FLORIDA 33135

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME FUNDORA RUBEN
STREET ADDRESS 4430 S.W. 1 STREET
CITY-ST-ZIP MIAMI, FLORIDA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PEDRO FUNDORA 3/14/03 (305)324-5603

PRESIDENT

Date

Daytime Phone #