

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

FILED

02 OCT 25 PM 12:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000038243

1. Entity Name

M&O PRODUCE CORP.

DO NOT WRITE IN THIS SPACE

500008600105
10/25/02--01108--023 **150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1402 NW 23RD STREET

Suite, Apt. #, etc.

3. Mailing Address
1402 NW 23RD STREET

Suite, Apt. #, etc.

City & State
MIAMI, FLORIDA

Zip 33142

Country USA

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MIAMI, FLORIDA

Zip 33142

Country USA

4. FEI Number 65-1000398

Applied For
Not Applicable

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

7. Name and Address of Current Registered Agent

Name GONZALEZ, ORLANDO

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

281 NW 127 AVENUE

City MIAMI

FL

Zip Code 33182

**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.

SIGNATURE

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

(NOTE: Registered Agent signature required when resigning)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☒

January 1 - May 1 Fee is \$350.00
After May 1 Fee is \$550.00
Amended UBR is \$812.00
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 NAME STREET ADDRESS CITY-ST-ZIP	P/V/S/T/D GONZALEZ, ORLANDO 281 NW 127 AVENUE MIAMI, FL 33182
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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 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 #

CR200348 (12/01)

Miami, Florida
October 18, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: P00000038243
M&O PRODUCE CORP.
1402 NW 23RD STREET
MIAMI, FL 33142

To Whom It May Concern:

Upon our conversation I'm enclosing the 2002 UBR form downloaded from the Internet. I have not received any related notices this year.

As per your request I'm enclosing the report with the \$150.00 fee and requesting to your office waive the penalties incurred in this situation.

Thank you for your help and I hope that this can solve this matter and avoid further penalties.

Respectfully,

ORLANDO GONZALEZ
PRESIDENT