

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 07, 2003 8:00 am**  
**Secretary of State**

03-07-2003 90077 015 \*\*\*150.00

**DOCUMENT # P00000040846**

1. Entity Name  
**EQUILIBRIUM FARM, INC.**



Principal Place of Business  
**450 SABAL WAY  
FORT LAUDERDALE FL 33326**

Mailing Address  
**2101 W COMMERCIAL BLVD  
STE 4100  
FORT LAUDERDALE FL 33309**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business  
**5731 SW 145th Avenue**

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**Southwest Ranches, FL 33330**

City & State

Zip Country

Zip Country

4. FEI Number **65-1010455**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**FORMAN, ROBERT S ESQ.  
2101 WEST COMMERCIAL BOULEARD  
SUITE 4100  
FORT LAUDERDALE FL 33309**

**7. Name and Address of New Registered Agent**

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 \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**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**

TITLE **PSTD** ☒ Delete  
NAME **TUCHMAN, LAURIE**  
STREET ADDRESS **450 SABAL WAY**  
CITY-ST-ZIP **FORT LAUDERDALE FL 33326**

TITLE **DSTD** ☐ Delete  
NAME **TUCHMAN, LAURIE**  
STREET ADDRESS **5731 SW 145TH AVE.**  
CITY-ST-ZIP **SOUTHWEST RANCHES FL 33330**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **5731 SW 145th Avenue**  
CITY-ST-ZIP **Southwest Ranches, FL 33330**

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

TITLE ☐ Change ☐ Addition  
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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:** *Laurie Tuchman* **SIGNED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Laurie Tuchman, President**

**3/1/03**

Date

**(954) 880-0995**

Daytime Phone #

CR2E034 (10/02)