

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2001 8:00 am
Secretary of State
 02-03-2001 90287 046 ***150.00

DOCUMENT # P00000055761

1. Entity Name

SUNSTATE COMMODITIES INC.

Principal Place of Business

**1877 S. FEDERAL HWY. #306
 BOCA RATON FL 33432**

Mailing Address

**1877 S. FEDERAL HWY. #306
 BOCA RATON FL 33432**

2. Principal Place of Business

3. Mailing Address

2150 N. OCEAN BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5 B

City & State

City & State

BOCA RATON FL

Zip

Country

Zip

Country

33431

4. FEI Number

65-1023216

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

**PATTERSON, PEGGY
 1877 S. FEDERAL HWY. #306
 BOCA RATON FL 33432**

Name

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

2150 N. OCEAN BLVD 5B

City

BOCA RATON

FL

Zip

33431

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 reinstating)

DATE

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

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**PEGGY PATTERSON
 2150 N. OCEAN BLVD 5B
 BOCA RATON, FL 33431**

13. 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 11 or Block 12 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 #

1-31-01

CR2E034 (10/00)