FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

attachment with an address, wi

SIGNATURE:

Apr 10, 2002 8:00 am Secretary of State DOCUMENT # P00000065047 04-10-2002 90034 011 ***150.00 1. Entity Name MINUTEMAN PRODUCE, INC. HUUb1004 DO NOT WRITE IN THIS SPACE 3. Mailing Address 11120 Marigold Dr. 2. Principal Place of Business 1F120 Marigold Dr. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Ý. Applied For 4. FEI Number City & State City & State 65-0398023 Sarasota, Sarasota, Fl Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 34202 34202 Fee Required 7. Name and Address of Current Registered Agent Rogers Steven-C. DO NOT WRITE Street Address (PO Box Number is Not Acceptable) 11120 Marigold Dr. IN THIS SPACE 34262 Sarasota 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 January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing After May 1, Fee is \$550.00 Amended UBR is \$61.25 \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS TITLE TITLE Rogers, Steven L. NAME NAME 11120 Marigold Dr. STREET ADDRESS STREET ADDRESS <u>Sarasota, F1 34202</u> CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME Rogers, Debra NAME STREET ADDRESS STREET ADDRESS 11120 Marigold Dr. CITY-ST-ZIP CITY+ST-7IP Sarasota, Fl 34202 TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE. TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 tristee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an

STEVEN L. Rogers Solor

Daytime Phone #

FILED