

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

APPROVED  
AND  
FILED

DOCUMENT # P00000105991

1. Entity Name

TORRESDALE FARMS, INC.

02 APR -3 AM 10:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
200 S. Biscayne Blvd.

3. Mailing Address  
200 S. Biscayne Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Ste. 4000

Ste. 4000

City & State

City & State

Miami, Florida 33131

Miami, Florida 33131

Zip

Country

Zip

Country

4. FEI Number

Applied For

65-1060782

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE  
IN THIS SPACE**

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

Name

Klock, Joseph P. Jr.

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

200 S. Biscayne Blvd., Ste 4000

City

Miami

FL

Zip Code

33131

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)

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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  
D/P/S/T  
Klock, Joseph P. Jr.  
200 S. Biscayne Blvd. #4000  
Miami, Florida 33131

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
100005283011--3  
-04/16/02--01067--009  
\*\*\*\*150.00 \*\*\*\*150.00

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

SIGNATURE:

Joseph P. Klock, Jr., President

3/20/02 305 577-2877

Date

Daytime Phone #

CR2E034B (12/01)