

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000055529

FILED  
Mar 14, 2002 8:00 AM  
Secretary of State

Entity Name: FLORIDA FRESH INTERNATIONAL, INC.

## Current Principal Place of Business:

300 NORTH KROME AVENUE  
UNIT #1  
FLORIDA CITY, FL 33034

## New Principal Place of Business:

## Current Mailing Address:

P. O. BOX 901348  
HOMESTEAD, FL 33090

## New Mailing Address:

FEI Number: 65-1110294

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAPP, STEVEN S  
27451 S. W. 170TH AVENUE  
HOMESTEAD, FL 33031 US

## Name and Address of New Registered Agent:

SAPP, STEVEN S  
300 N. KROME AVE BUILDING 1  
HOMESTEAD, FL 330901348 US

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:

03/14/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SAPP, STEVEN S  
Address: 27451 S. W. 170TH AVENUE  
City-St-Zip: HOMESTEAD, FL 33031

Title: D ( ) Delete  
Name: SAPP, EDWIN B  
Address: 19240 S. W. 312TH STREET  
City-St-Zip: HOMESTEAD, FL 33030

Title: D ( ) Delete  
Name: FONSECA, FERNANDO F  
Address: 51 S. W. 134TH COURT  
City-St-Zip: MIAMI, FL 33184

Title: D ( ) Delete  
Name: SOTOLONGO, ARMANDO D  
Address: 9283 S. W. 169TH AVENUE  
City-St-Zip: MIAMI, FL 33196

Title: D (X) Delete  
Name: HEVENER, WILLIAM M  
Address: 19840 S. W. 243RD TERRACE  
City-St-Zip: HOMESTEAD, FL 33031

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SAPP, STEVEN S  
Address: 27451 S. W. 170TH AVENUE  
City-St-Zip: HOMESTEAD, FL 33031

Title: D (X) Change ( ) Addition  
Name: SAPP, EDWIN B  
Address: 2955 SE 4TH PLACE  
City-St-Zip: HOMESTEAD, FL 33035

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN S. SAPP

PRES

03/14/2002

Electronic Signature of Signing Officer or Director

Date