2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000022413

Entity Name: AGROBIO USA, INC.

City-St-Zip:

FILED Apr 12, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4444 LAKESIDE AVENUE NORT FORT MYERS, FL 33903 **Current Mailing Address: New Mailing Address:** 4444 LAKESIDE AVENUE NORT FORT MYERS, FL 33903 FEI Number: 04-3613257 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PADILLA, SHERRY L 4444 LAKESIDE AVENUE NORT FORT MYERS, FL 33903 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change (X) Addition PADILLA, SHERRY LT Name: Name: 4444 LAKESIDE AVENUE Address: Address: City-St-Zip: City-St-Zip: NORTH FORTH MYERS, FL 33903 US Title: () Delete Title: () Change (X) Addition Name: Name: PADILLA, SHERRY L P 4444 LAKESIDE AVENUE Address: Address: NORTH FORT MYERS, FL 33903 US City-St-Zip: City-St-Zip: Title: Title: () Delete () Change (X) Addition PADILLA, SHERRY L V Name: Name: 4444 LAKESIDE AVENUE Address Address: City-St-Zip: City-St-Zip: NORTH FORT MYERS, FL 33903 US Title: () Delete Title: () Change (X) Addition PADILLA, SHERRY L S Name: Name: Address: Address: 4444 LAKESIDE AVENUE

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.

City-St-Zip:

NORTH FORTH MYERS, FL 33903 US

SIGNATURE: SHERRY PADILLA P 04/12/2003