

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000101603

FILED
Apr 30, 2003
Secretary of State

Entity Name: COUNTRY FOLKS MEATS AND PRODUCE,INC.

Current Principal Place of Business:

4112 NW 167STREET
OPA-LOCKA, FL 33055

New Principal Place of Business:

4112 NW 167STREET
OPA-LOCKA, FL 33054

Current Mailing Address:

4112 NW 167STREET
OPA-LOCKA, FL 33055

New Mailing Address:

4112 NW 167STREET
OPA-LOCKA, FL 33054

FEI Number: 05-0535647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, MAURICE J SR.
4112 NW 167STREET
OPA-LOCKA, FL 33055 US

Name and Address of New Registered Agent:

ROBINSON, MAURICE J SR.
4112 NW 167STREET
OPA-LOCKA, FL 33054

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: MAURICE J. ROBINSON, SR.

04/30/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROBINSON, MAURICE J SR.
Address: 4112 NW 167STREET
City-St-Zip: OPA-LOCKA, FL 33055

Title: V (X) Delete
Name: ROBERTS, WILLIAM L SR.
Address: 4112 NW 167STREET
City-St-Zip: OPA-LOCKA, FL 33055

Title: T (X) Delete
Name: ROBINSON, THERESA G
Address: 4112 NW 167STREET
City-St-Zip: OPA-LOCKA, FL 33055

Title: S (X) Delete
Name: GARMON, MAUDERIA
Address: 4112 NW 167STREET
City-St-Zip: OPA-LOCKA, FL 33055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MAURICE J. ROBINSON, SR.

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04/30/2003

Electronic Signature of Signing Officer or Director

Date