

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P24147

FILED  
May 06, 2002 8:00 AM  
Secretary of State

Entity Name: FARM LABOR RESEARCH PROJECT, INC.

## Current Principal Place of Business:

1221 BROADWAY ST  
TOLEDO, OH 43609

## New Principal Place of Business:

## Current Mailing Address:

1221 BROADWAY ST  
TOLEDO, OH 43609

## New Mailing Address:

FEI Number: 34-1329126

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CUEVAS, FERNANDO  
326 EAST MAPLE STREET  
WINTER GARDEN, FL 34787 US

## Name and Address of New Registered Agent:

ZAVALA, LETICIA  
602 N. WARNELL ST.  
PLANT CITY, FL 33566 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: LETICIA ZAVALA

05/06/2002

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: VELASQUEZ, BALDEMAR,  
Address: 3352 PLAINVIEW  
City-St-Zip: TOLEDO, OH

Title: V ( ) Delete  
Name: BARGER, KENNETH  
Address: 6143 RIVERVIEW DR  
City-St-Zip: INDIANAPOLIS, IN 46208

Title: S ( ) Delete  
Name: RIOS, SARA,  
Address: 402 SECOND STREET # 2  
City-St-Zip: BROOKLYN, NY 11215

Title: D ( ) Delete  
Name: REZA, ERNESTO  
Address: 5159 N MOUNTAIN VIEW AVE  
City-St-Zip: SAN BERNADINO, CA

Title: D ( ) Delete  
Name: RODRIGUEZ, ANTERO  
Address: PO BOX 1976 N/A  
City-St-Zip: PLANT CITY, FL 33566

Title: D ( ) Delete  
Name: NATHAN, BEVERLY  
Address: 3321 GRIMSBY PLACE  
City-St-Zip: TOLEDO, OH 43606

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition  
Name: MUNIZ-MUTCHLER, SYLVIA  
Address: 2735 HEMLOCK  
City-St-Zip: TOLEDO, OH 43614

Title: D (X) Change ( ) Addition  
Name: JOSEPH, FLORES  
Address: 2472 SCOTTWOOD  
City-St-Zip: TOLEDO, OH 43620

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BALDEMAR VELASQUEZ

D

05/06/2002

Electronic Signature of Signing Officer or Director

Date