FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

page 152

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| DOCU | JMENT # P32 | 752 | 14 . 0 | 02 NOV 27 PM 3 | 3: 38 |
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| Colorado Prime Corporation | | | | SEURETARY UP STATE TALLAHASSEE, FLORIDA | |
| | DO NOT WRITE | IN THIS S | SPACE | NAME OF THE PROPERTY OF THE PR | |
| 2. Principal | Place of Business Bi County Blud | 3. Mailing Address | to Blud | | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | 00 19/2/20 | DO NOT WRITE IN THIS | S SPACE |
| City & Siz | mingdale | City & State | | 4. FEI Number 11-2826129 | Applied for Not Applicable |
| ^{Zip} 17 | 35 Country | Zip 11735 | Country USA | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| 7. Name and Address of Current Registered Agent Name Prentice - Hall Corp. System, Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Talla hassee FL 32301 City FL 32301 | | | | | |
| SIGNATURE 9. This corp Tax filing | e named entity submits this statement for Signature, typed or printer name of registered agent an oriation is eligible to satisfy its Intangible requirement and elects to do so. | d title if applicable. (NO January 1 After Ma Amende | S registered office or regis TC: Registered Agent signature requi May 1: Fee is \$150.00 / 1, Fee is \$550.00 d UBR is \$61/25 ble to Department of S | 10. Election Campaign Financing Trust Fund Contribution. | \$5.00 May Be Added to Fees |
| 11 , | OFFICERS AND D | | | late | |
| NAME STREET ADDRESS CITY-ST-ZIP | Fred Spirak | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 000008675 10/29/0201136029 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | TVIS. Sec Greg Isgro 500 Bi-County Blud # 400 Farming dale Ny 11735 Pros. | | NAME STREET ADDRESS CITY-ST-ZIP | Kirly | |
| NAME STREET ADDRESS CITY-ST-ZIP HTLE | Paul Roman Bwd. # 400. 500 Bl County Bwd. # 400. Farming dale my 11735 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | DO NOT WRITE | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | NAME STREET ADDRESS CITY ST ZIP | IN THIS SPACE | CE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | NAME STREET ADDRESS' CITY-ST-ZIP | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | TITLE NAME STREET ADDRESS CITY ST. ZIP | . : | |
| 13. Thereby coindicated of the corpattachment | ertify that the information supplied with the on this report or supplemental report is truporation or the receiver or trustee empown the with an address, with all other like emports. | s filing does not qualify for the and accurate and that n ered to execute this report | the exemption stated in S ny signature shall have the t as required by Chapter (| ection 119.07(3)(i), Florida Statutes. Hurther ce same legal effect as if made under oath: that fa 507, Florida Statutes; and that my name appears | tily that the information in an officer or director s in Block 11 or on an |

D NAME OF SIGNING OFFICER OR DIRECTOR



10/21/02

Department of State
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314-6327

Enclosed is the application for the 2002 annual report. Last year in a memo dated 11/28/01 I requested that all information regarding annual reports be mailed to my attention. Unfortunately, I never received the original report. Attached is my \$150.00 fee for the annual report. In a phone conversation with Barbara Mitchell, I explained what had happened and she told me I could forward the \$150 with the application but that I would need to re-file again in January for 2003. She explained that if I have not received any correspondence by February, I should call her back and we can expedite it as soon as possible.

If you need any additional information, please call my at 631-694-1111 ext 531.

Thank you,

Anna Cilmi Colorado Prime Corporation 500 Bi-County Blvd. Suite 400 Farmingdale, NY 11735