

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000071410

1. Entity Name
OSHAWA GROUP PRODUCE INC.

FILED
Feb 21, 2001 8:00 am
Secretary of State

02-21-2001 90061 041 ***150.00

Principal Place of Business
WOOLBRIGHT CORPORATE CENTER
1903 S CONGRESS AVE., S-300
BOYNTON BCH. FL 33426
US

Mailing Address
WOOLBRIGHT CORPORATE CENTER
1903 S CONGRESS AVE., S-300
BOYNTON BCH. FL 33426
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 65-0441887		Applied For ☐ Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
HODSGON, RUSS, ANDREWS, WOODS & GOODYEAR 2000 GLADES RD STE 400 BOCA RATON FL 33431				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City		FL	

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
---	---	--

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	C	☒ Delete	TITLE	C	☐ Change ☒ Addition
NAME	STEWART, DOUGLAS		NAME	WILLIAM MCEWAN	
STREET ADDRESS	39 BELL ST		STREET ADDRESS	39 BELL ST	
CITY-ST-ZIP	NEW GLASGOW, NOVA SCOTIA		CITY-ST-ZIP	NEW GLASGOW, NOVA SCOTIA	
TITLE	P	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	SOBEY, JOHN		NAME		
STREET ADDRESS	48 WEIR AVENUE		STREET ADDRESS		
CITY-ST-ZIP	STELLARTON, NOVA SCOTIA		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	DUTTON, ANTHONY		NAME		
STREET ADDRESS	200 GLADES RD STE-400		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		CITY-ST-ZIP		
TITLE	V	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	ROWE, ALLAN		NAME		
STREET ADDRESS	312 FORBES STREET		STREET ADDRESS		
CITY-ST-ZIP	NEW GLASGOW, NOVA SCOTIA		CITY-ST-ZIP		
TITLE	S	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	EWERT, DARRELL		NAME		
STREET ADDRESS	104 MARTIN ST		STREET ADDRESS		
CITY-ST-ZIP	KING CITY ON		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] 2000/01/11 905-671-6123
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CP2E034 (10/00)