

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000044408

1. Entity Name  
OX BOW FARMS, INC.

**FILED**  
**Apr 13, 2001 8:00 am**  
**Secretary of State**

04-13-2001 90054 046 \*\*\*150.00

00036055



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
290 SMITH SUNDY RD  
DELRAY BEACH FL 33446  
US

Mailing Address  
3701 NW 84 TERR  
CORAL SPRINGS FL 33065  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0595879**

Applied For  
Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GUERRERA, JOSEPH E  
3701 NW 84 TERR  
CORAL SPRINGS FL 33065

Name Guerrera, Jose  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (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  
NAME **DP**  
STREET ADDRESS **GUERRERA, JOSEPH E**  
CITY-ST-ZIP **3701 NW 84 TERR**  
**CORAL SPRINGS FL 33065**

☐ Delete

TITLE  
NAME **DP**  
STREET ADDRESS **Guerrera, Joseph E**  
CITY-ST-ZIP **2571 Bradley Gin Rd**  
**Monroe, GA 30666**

☒ Change ☐ Addition

TITLE  
NAME **DST**  
STREET ADDRESS **GUERRERA, MAXINE**  
CITY-ST-ZIP **3701 NW 84 TERR**  
**CORAL SPRINGS FL 33065**

☐ Delete

TITLE  
NAME **DST**  
STREET ADDRESS **Guerrera, Maxine**  
CITY-ST-ZIP **2571 Bradley Gin Rd**  
**Monroe, GA 30666**

☒ Change ☐ Addition

TITLE  
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STREET ADDRESS  
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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)