

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90949 048 ***150.00

DOCUMENT # P940000900551 / 1. Entity Name INTERNATIONAL ORGANIC FOODS, INC.					
Principal Place of Business 6210 S.W. 38TH STREET MIAMI FL 3+315-5			Mailing Address 6210 S.W. 38TH STREET MIAMI FL 3+315-5		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0539199 ☐ Applied For ☐ Not Applicable	
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		
MENDOZ, RICARDO A. 8210 SW 38TH ST MIAMI FL 33155			Name		
			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 if not applicable (NOTE: Registered Agent signature required when reinstating)					
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: PSTD ☐ Delete NAME: MAGDALENA STREET ADDRESS: 6210 SW 38TH STREET CITY-ST-ZIP: MIAMI FL 3+315-5			TITLE: ☐ Change ☐ Addition NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____		
TITLE: S ☐ Delete NAME: RICARDO A. MENDOZA STREET ADDRESS: 8210 SW 38TH STREET CITY-ST-ZIP: MIAMI FL 33155			TITLE: ☐ Change ☐ Addition NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____		
TITLE: _____ ☐ Delete NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____			TITLE: _____ ☐ Change ☐ Addition NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____		
TITLE: _____ ☐ Delete NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____			TITLE: _____ ☐ Change ☐ Addition NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____		
TITLE: _____ ☐ Delete NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____			TITLE: _____ ☐ Change ☐ Addition NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____		
TITLE: _____ ☐ Delete NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____			TITLE: _____ ☐ Change ☐ Addition NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____		
13. I hereby certify that the information supplied in this filing does not qualify for the exemption status in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this report or supplement thereto 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 over like empowers.					
SIGNATURE: <i>Ricardo A. Mendoza</i> SECRETARY 4/25/01 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CR2E034 (10/00)