May 16, 2002 8:00 am
Secretary of State
05-16-2002 90054 036 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000090055

1. Entity Name

INTERNATIONAL ORGANIC FOODS, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address	
6210 SW 38th ST	6210 SW 38,Th St	DO NOT WRITE IN THIS SPACE
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State: MIAMI FLORIDA	City & State: MIAMI FLORIDA	4. FEI Number: 65-0539199 ☐ Applied For ☐ Not Applicable
Zip: 33155 Country: DADE	Zip: 33155 Country:	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: ALMERILAWYER

Street Address (P.O. Box Number is Not Acceptable): 343 ALMERIA AVENUE CORAL GABLES FL 33134

City: MIAMI FL Zip Code: 33134

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: _____ DATE
Signature, typed or printed name of registered agent and title if 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) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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

TITLE	P
NAME	JOSIE DIEZ CANSECO
STREET ADDRESS	2501 BRICKELL AV STE 306
CITY-ST-ZIP	MIAMI, FLORIDA 33129
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	S
NAME	RICARDO A. MENDOZA
STREET ADDRESS	6210 SW 38 Th ST
CITY-ST-ZIP	MIAMI, FLORIDA 33155
TITLE	
NAME	
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: JOSIE DIEZ CANSECO 305-857-0237
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #