2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 25, 2002 8:00 am
Secretary of State
07-25-2002 90121 045 ***550.00

DOCUMENT # P95000042038

1. Entity Name
NEW ZEALAND DAIRY SERVICES (LATIN AMERICA) INC.

Principal Place of Business	Mailing Address
ONE FINANCIAL PLAZA SUITE 2700 FORT LAUDERDALE FL 33394	ONE FINANCIAL PLAZA SUITE 2700 FORT LAUDERDALE FL 33394

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2400 NORTH COMMERCE PKWY	2400 NORTH COMMERCE PARKWAY
Suite, Apt. #, etc.: 300	Suite, Apt. #, etc.: 300
City & State: WESTON, FL	City & State: WESTON, FL
Zip: 33326 Country: USA	Zip: 33326 Country: USA

4. FEI Number 65-0581959 ☐ 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
MURDOCH, ROBERT E ESQ. JOHNSON, ANSELMO, MURDOCH, ET AL, P.A. 790 E. BROWARD BLVD., SUITE 400 FORT LAUDERDALE FL 33301-	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. I am familiar with, and accept the obligations of registered agent.

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) ☐

FILE NOW!!! FEE IS $550.00
After September 13, 2002 Fee will be $750.00
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 / STREET ADDRESS / CITY-ST-ZIP	PD EGLINGTON, SCOTT ONE FINANICAL PLAZA, 2700 FORT LAUDERDALE FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD JUAN CARLOS PESTANA 2400 NORTH COMMERCE PARKWAY WESTON, FL 33326	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MD HEPBURN, JIM ONE FINANICAL PLAZA, #2700 FORT LAUDERDALE FL 33394	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DIEGO CASTRO 2400 NORTH COMMERCE PARKWAY WESTON, FL 33326	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FM FOSTER, MATTHEW ONE FINANCIAL PLAZA, 2700 FORT LAUDERDALE FL 33394	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CONTROLLER/SECRETARY ZENA LOCKNANAN-CLARKE 2400 NORTH COMMERCE PARKWAY WESTON, FL 33326	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (4/02)

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: ZENA LOCKNANAN-CLARKE 07/17/02 (954) 377-8837
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #