- 800	O UNIFORM BUS	iness rep	ORT (UBR)	in the second	/,	
DOCUMENT # 1. Entity Name P97000047111				FILED		
INCREDIBLE PRODUCE HOUSE, INC.				00 OCT -4 PH 3	00 OCT -4 PH 3:31	
Principal Pla	ace of Business	Mailing Address		SECRETARY OF STATE TALLAHASSEE, FLORIDA		
1265 N.W. 22nd ST. MIAMI, FL 33142				X		
2. Principal Place of Business . 3. Mailing Address				<u> </u>		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FEI Number (25-0757365	Applied Fo	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional	
	6. Name and Address of Current F	Registered Agent		7. Name and Address of New Registers		
1		***************************************	Name			
ESTELA HERRERA 1265 N.W. 22nd ST.			Street Address	Street Address (P.O. Box Number is Not Acceptable)		
MIAMI, FL 33142			<u> </u>			
! 			City	F	Zip Code	
8. The above	e named entity submits this statement for	the purpose of changing its	s registered office or registr	ered agent, or both, in the State of Florida.		
ļ	Total !				·	
SIGNATURE	Signature, typed or printed name of registered agent an	d little if applicable (NOT	E: Registered Agent signature require	ed when reinstating) DAT		
9. This corpo	oration is eligible to satisfy its Intangible	MERCHANICATION FOR THE CONTRACT OF STREET	III FEE IS \$150.00	Early Sta		
Tax filing r	requirement and elects to do so.	After MAY 1, 20	100 Fee will be \$550.00	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May B	
11.	OFFICERS AND D	the at a state of the state of	ole to Department of St	are and a second	7,0000 10 1 000	
TITLE	OFFICERS AND D	Delete	12.	ADDITIONS/CHANGES TO OFFICERS A		
NAME	P/V/S/T/D	L. Delete	NAME	300003459	- Change	
STREET ADDRESS CITY-ST-ZIP	ESTELA HERRERA 1265 N.W. 22nd ST.		STREET ADDRESS	30000345	-01105015	
TITLE	MIAMI, FL 33165		CITY-ST-ZIP	****15U,U) ****150.00	
NAME	D IODGE HERREDA	☐ Delete	TITLE NAME	•	☐ Change ☐ ****	
STREET ADDRESS	JORGE HERRERA 1265 N.W. 22nd ST.		STREET ADDRESS			
CITY-ST-ZIP	MIAMI, FL 33165		CITY-ST-ZIP			
TITLE NAME		Delete	TITLE		Change C	
STREET ADDRESS			NAME STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	
NAME STREET ADDRESS			NAME		_ · _ ·	
CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		Change Addition	
NAME STREET ADDRESS			NAME			
CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP			
TITLE	,	☐ Delete	TITLE		—	
NAME			NAME		Change Additio	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS			
	ertify that the information supplied with the	e filing does not a self.	CITY-ST-ZIP			
of the corp	on this report or supplemental report is tru- oration or the receiver or trustee empower or on an attachment with an address, with	red to execute this report a	the exemption stated in Se y signature shall have the s s required by Chapter 607	ction 119.07(3)(i), Florida Statutes. I further ce same legal effect as if made under oath; that i , Florida Statutes; and that my name appears	ertify that the information am an officer or director in Block 11 or Block 12 if	
SIGNATU	JRE: Stole H	enera.				
	SIGNATURE AND TYPED OR PRINT	ED NAME OF SIGNING OFFICER OF	R DIRECTOR	Date	Davume Phone #	

Date

Daytime Phone #

Sox

INCREDIBLE PRODUCE HOUSE, INC. DOC.# P97000047111

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

ENCLOSED YOU WILL FIND THE UNIFORM BUSINESS REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

DUE TO A CHANGE OF MAILING AND PRINCIPAL ADDRESS I NEVER RECEIVED FIRST NOR SECOND NOTICE OF SUCH REPORT.

THANK YOU FOR YOUR COURTESY IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTIONS REGARDING THIS LETTER PLEASE DON'T HESITATE TO CONTACT ME IN THE ADDRESS LISTED IN THE UNIFORM BUSINESS REPORT.

SINCERELY,

ESTELA HERRERA

PRESIDENT