2000 UNIFORM BUSINESS REPORT (UBR) DOČLIMENT # POZODO

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1. Entity Nam	CHO FOOD CORP.	0003				Secretary of 03-20-2000 90080 003	f State		
Principal Place of Business			Mailing Address						
2608 NORTHWEST 21ST TERRACE MIAMI FL 33142		782 NW LE JEUNE RD. SUITE 434 MIAMI FL 33126-5549							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State		City & State			4.	FEI Number 65-0777429	Applied For Not Applicable		
Zip	Country	Zip		Country	5.		8.75 Additional ee Required		
	6. Name and Address of Current F	egistered	Agent		7.	Name and Address of New Registered A	gent		
VARENA PARIS, NELSO I 14736 SOUTHWEST 132ND COURT MIAMI FL 33186			-	Street Addre	Name Street Address (P.O. Box Number is Not Acceptable)				
i				City		FL	Zip Code		
8. The above	named entity submits this statement for Signature, typed or printed name of registered agent an	_		gistered office or regi					
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, 2000 Fee will be \$550.00 Make Check Payable to Department of S		I Inusi cunu Commoudon. La Added to cees 1				
11.	1. OFFICERS AND DIRECTORS 1			12.	Αſ	DDITIONS/CHANGES TO OFFICERS AND			
TITLE NAME STREET ADDRESS	PD Varena Paris, Nelso 14736 Southwest 132ND Coui	RT	☐ Delete	TITLE NAME STREET ADDRESS			Change Addition		

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VARENA PARIS, NELSO I 14736 SOUTHWEST 132ND COURT MIAMI FL 33186	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD POMETTI, LUISA E 14736 SOUTHWEST 132ND COURT MIAMI FL 33186	□ De'ete	TITLE NAME STREET ADDRESS CITY-ST-ZIP] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD VARENA, ROBERTO 14736 SOUTHWEST 132ND COURT MIAMI*FL"33186	☐ Delete	TITLE NAME STREET ADDRESS GITY-ST-ZIP] Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD VARENA, MAURO 14736 SOUTHWEST 132ND COURT MIAMI FL 33186	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delute	TITLE NAME STREET ADDRESS CITY-ST-ZIP] Change	☐ Addition
NAME STREET ADDRESS	•	☐ Delete	TITLE NAME STREET ADDRESS CITY ST. 7IB] Change	Addition

13. I hereby certify that the information supplied with this filling does not qualify be 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 of truesdee and owered to execute this report as required by Chapte 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment v

SIGNATURE;

SIGNATURE AND TYPED OR PRINTED NAM

Daytime Phone #