

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 21, 2003 8:00 am**  
**Secretary of State**

04-21-2003 90543 049 \*\*\*150.00

|                                                          |                                                                                   |
|----------------------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT #</b> P97000099998                           |  |
| <b>1. Entity Name</b><br>JOHN J. O'HEARN JR. PRODUCE CO. |                                                                                   |

|                                                                          |                                                             |
|--------------------------------------------------------------------------|-------------------------------------------------------------|
| <b>Principal Place of Business</b><br>348 SOUTH SR 7<br>MARGATE FL 33068 | <b>Mailing Address</b><br>PO BOX 720807<br>ORLANDO FL 32872 |
|--------------------------------------------------------------------------|-------------------------------------------------------------|

|                                                        |                           |
|--------------------------------------------------------|---------------------------|
| <b>2. Principal Place of Business</b><br>PO Box 720807 | <b>3. Mailing Address</b> |
|--------------------------------------------------------|---------------------------|

|                                        |                            |
|----------------------------------------|----------------------------|
| <b>Suite, Apt. #, etc.</b>             | <b>Suite, Apt. #, etc.</b> |
| <b>City &amp; State</b><br>Orlando, FL | <b>City &amp; State</b>    |

|                     |                          |            |                |
|---------------------|--------------------------|------------|----------------|
| <b>Zip</b><br>32872 | <b>Country</b><br>Orange | <b>Zip</b> | <b>Country</b> |
|---------------------|--------------------------|------------|----------------|

|                                    |                                                               |
|------------------------------------|---------------------------------------------------------------|
| <b>4. FEI Number</b><br>06-1508273 | <b>Applied For</b><br><input type="checkbox"/> Not Applicable |
|------------------------------------|---------------------------------------------------------------|

|                                                                  |                                       |
|------------------------------------------------------------------|---------------------------------------|
| <b>5. Certificate of Status Desired</b> <input type="checkbox"/> | <b>\$8.75 Additional Fee Required</b> |
|------------------------------------------------------------------|---------------------------------------|

☒ CHECK HERE IF MAKING CHANGES

|                                                                                                                            |                                                                                                                                                     |
|----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>6. Name and Address of Current Registered Agent</b><br><br>CORPORATION SERVICE<br>1201 HAYS ST.<br>TALLAHASSEE FL 32301 | <b>7. Name and Address of New Registered Agent</b><br><br>Name<br><br>Street Address (P.O. Box Number is Not Acceptable)<br><br>City<br>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** \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) **DATE** \_\_\_\_\_

|                                                                                                                                                 |                                                                                                                               |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2003 Fee will be \$550.00</b><br><b>Make Check Payable to Florida Department of State</b> | <b>9. Election Campaign Financing</b><br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|

| 10. OFFICERS AND DIRECTORS                                                                                                                 |                                 | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                       |                                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <b>TITLE</b><br>D<br><b>NAME</b><br>O'HEARN, JOHN J JR<br><b>STREET ADDRESS</b><br>32 BERLIN AVE.<br><b>CITY-ST-ZIP</b><br>MILTON MA 02186 | <input type="checkbox"/> Delete | <b>TITLE</b><br>D<br><b>NAME</b><br>O'Hearn, John J Jr<br><b>STREET ADDRESS</b><br>PO Box 720807<br><b>CITY-ST-ZIP</b><br>Orlando, FL 32872 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>                                                     | <input type="checkbox"/> Delete | <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>                                                     | <input type="checkbox"/> Delete | <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>                                                     | <input type="checkbox"/> Delete | <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>                                                     | <input type="checkbox"/> Delete | <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>                                                     | <input type="checkbox"/> Delete | <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |

**12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:** John J. O'Hearn Jr. **04/14/03** **561/860-9391**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CRCE034 (10/02)

*Attachment #*

*P97000099998*  
**O'HEARN PRODUCE COMPANY**

*20030252*  
**JOHN J. O'HEARN, JR.  
PRESIDENT.**

**PO BOX 720807  
ORLANDO, FLORIDA 32872  
PHONE: 561 / 860 - 9391  
EMAIL: JOH2006567@AOL.COM**

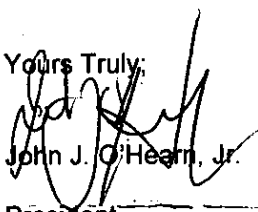
April 12 2003

Uniform Business Reports  
Division Of Corporations  
PO Box 1500  
Tallahassee, FL 32302-1500  
850 / 488 - 9000

Dear Sirs:

Enclosed, please find the John J. O'Hearn, Jr. Produce Company's 2003 (UBR), For Profit Corporation Uniform Business Report document number P97000099998, and, a Money Order for \$150.00. Please do not hesitate to contact me at any time at 561 / 860 9391.

Yours Truly;

  
John J. O'Hearn, Jr.

President