Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90070 006 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000060931

UNIVERSAL AMERICAN PRODUCE INC.

Principal Place	of Business	Mailing Address				- I JANISHAN (IN INICH IESHI ANIH ANIH ANIH ENIH ENIH ENIH ENIH ENIH ENIH ENIH E	i iiki imbi	
8550 WEST FLA	•	8550 WEST FLAGLER STREET						
SUITE 102		SUITE 102				DA NOT MOTE IN THE OBJECT		
MIAMI FL 33144		MIAMI FL 33144				DO NOT WRITE IN THIS SPACE		
	,					3. Date Incorporated or Qualifed 07/09/1998		
2. Principal Place of Business 2a. Mailing Add			SS			4. FEI Number Applie	d For	
21	•	26	B			65-0860566 Not A	pplicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Add		
22		27				5. Certificate of Status Desired Fee Requi		
City & State	• ·	City & State				6. Election Campaign Financing \$5.00 May Be		
23		Zip Country				Trust Fund Contribution Added to Fees		
Zip				ниу		8. This corporation owes the current year Intangible	No	
24	25	29 30			•	Personal Property Tax. Yes No 10. Name and Address of New Registered Agent		
Name and Address of Current Registered Agent					Name	To. Hame and Address of New Registeres Agent		
RODRIGUEZ, ANTONIO				81				
8550 WEST FLAGLER STREET				82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
SUITE 102			}	83				
	AI FL 33144			~				
RIDGIII I E GOTTY			l	84	City	FI 85 Zip Cod	e	
						, , ,	ictored	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE								
	Signature, typed or printed name of registered agent	· · · · · · · · · · · · · · · · · · ·		Agent	t signature required			
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
TITLE	PVST DELETE			1.1 TITLE		☐ Change	Addition	
NAME	RODRIGUEZ, ANTONIO		1.2 NAME					
STREET ADDRESS 8550 WEST FLAGLER STREET			1.3 STREET ADDRES		ADDRESS			
CITY-\$T-ZIP			1.4 CITY-ST-ZIP		-ZIP			
TITLE	D	☐ DELETE	2.1 TIT	ĽΕ		☐ Change	☐ Addition	
NAME	RODRIGUEZ, ANTONIO		2.2 NA	ME				
STREET ADDRESS			2.3 STI	REET.	ADDRESS		.	
CITY-ST-ZIP	MIAMI FL 33144		2. 4 CI		T-ZIP	,		
TITLE		☐ DELETE	3.1 TIT	LE		☐ Change	Addition	
NAME			3.2 NA	ME			ŀ	
STREET ADDRESS	•		3.3 STI	REET	ADDRESS			
CITY-ST-ZIP			3.4. CF	TY-ST	T-ZIP			
TITLE		☐ DELETE	4.1 TH	LΕ		Change (Addition	
NAME			4, 2 NA	WE				
STREET ADDRESS	•		4.3 ST	REET	ADDRESS			
CITY-ST-ZIP			4.4 CIT	Y-\$T	-ZIP	de No.		
TITLE		☐ DELETE	5.1 TIT			☐ Change	Addition	
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 STI	REET	ADDRESS		ł	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

(305) 226-5693 (305) 226-5693

5.4 CITY+ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

☐ DELETE

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

ANTONIOCRODRIGUEZ: REQUIRES SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF REDIRECTOR

MARCH 15TH, 1999

Addition