2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P99000019248 Aug 16, 2000 8:00 am Secretary of State 1. Entity Name SUNSHINE DAIRY DISTRIBUTOR, INC. 08-16-2000 90002 012 ***150.00 Principal Place of Business Mailing Address 16420 SW 144 PLACE 16420 SW 144 PLACE MIAMI FL 33177 MIAMI FL 33177 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc City & State Applied For Mianu Not Applicable Gountry. 5. Certificate of Status Desired 33196 iami -7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name VAZQUEZ, CARLOS Street Address (P.O. Box Number is Not Acceptable) 16420 SW 144 PLACE MIAMI FL 33177 Zip Code FL 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition PD TITLE ☐ Change Delete TITLE NAME VAZQUEZ, CARLOS NAME STREET ADDRESS STREET ADDRESS 16420 SW 144 PLACE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33177 ☐ Addition ☐ Change ☐ Delete TITLE TITLE VAZQUEZ. MERCEDES NAME NAME STREET ADDRESS STREET ADDRESS 16420 SW 144 PLACE CITY-ST-ZIP CITY-ST-ZIP MIAMI-FL 33177 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CJTY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

305-385-6046 Davime Phone #

attachment 1 pg9000019248 AW73056

July 27, 2000

Re: Sunshine Dairy Distributor Carlos Vazquez 15572 SW 115 ST. Miami, Fl 33196

To Whom It May Concern:

This is to inform you that we never received the Uniform Business Report. We moved on April, 1999 to 15572 SW 115 ST. Miami, Fl 33196 and at that time we send a change of address.

Attached you will find report and a check for \$150.00 that when I call 1-850-488-9000 they told me to send.

Please update your records with our correct address.

Sincerely,

Carlos Vazquez