

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90179 001 ***150.00



DO NOT WRITE IN THIS SPACE

DOCUMENT # P99000031791

1. Entity Name
AGRO INDUSTRIES, INC.

Principal Place of Business

Mailing Address

RR2
BOX 5075
FORT WHITE FL 32038

P.O. BOX 2051
LAKE CITY FL 32056

2. Principal Place of Business **S.W.**

3. Mailing Address

5834 ELIM CHURCH Rd.

P.O. BOX 365

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

FORT WHITE, FL

FORT WHITE, FL

Zip
32038

Country
USA

Zip
32038

Country
USA

4. FEI Number **65-0911377**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.
333 ALMERIA AVENUE
CORAL GABLES FL 33134

Name

Street Address (P.O. Box Number is Not Acceptable)

City

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PSTD** ☐ Delete
 NAME **DANIEL, EDDY-MICHEL**
 STREET ADDRESS **RR2 BOX 5075**
 CITY-ST-ZIP **FORT WHITE FL 32038**

TITLE **CHAIRMAN, CEO - PSTD** ☐ Change ☐ Addition
 NAME **DANIEL, EDDY-MICHEL**
 STREET ADDRESS **5834 SW ELIM CHURCH ROAD**
 CITY-ST-ZIP **FORT WHITE, FL. 32038**

TITLE **VP** ☐ Delete
 NAME **DANIEL, MARIA-JOSE**
 STREET ADDRESS **RR2 BOX 5075**
 CITY-ST-ZIP **FORT WHITE FL 32038**

TITLE **VP** ☐ Change ☐ Addition
 NAME **DANIEL, MARIA-JOSE**
 STREET ADDRESS **5834 SW ELIM CHURCH Rd.**
 CITY-ST-ZIP **FORT WHITE, FL. 32038**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 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.

SIGNATURE

Eddy Michel **REQUIRED**

4-19-02 (386) 497,4983

CR2E034 (9/01)