

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000044606

1. Entity Name

EAST BEACH PACKING CO., INC.

FILED
Apr 11, 2001 8:00 am
Secretary of State

04-11-2001 90035 016 ***150.00

Principal Place of Business
650 STATE FARMERS MARKET RD.
PAHOKEE FL 33476

Mailing Address
PO BOX 244
PAHOKEE FL 33476

LUU44603



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0928516

Applied For
Not Applicable

Zip

Country

Zip

Country

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

HATTON, TRAVIS
1515 EAST MAIN STREET
PAHOKEE FL 33476

Name HATTON, Travis

Street Address (P.O. Box Number is Not Acceptable)
13600 S.W. Connors Hwy.

City Okeechobee, Fl. FL Zip Code 34974

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 *Travis Hatton*

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

(NOTE: Registered Agent signature required when reinstating)

DATE 4-4-01

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, 2001 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 DP
NAME HATTON, TRAVIS
STREET ADDRESS 1515 EAST MAIN STREET
CITY-ST-ZIP PAHOKEE FL 33476 ☐ Delete

TITLE DP
NAME HATTON Travis
STREET ADDRESS 13600 S.W. Connors Hwy
CITY-ST-ZIP Okeechobee Fl. 34974 ☒ Change ☐ Addition

TITLE DVP
NAME ARRIETA, ROBERT
STREET ADDRESS 2171 S.W. 21ST STREET
CITY-ST-ZIP OKEECHOBEE FL 34974 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME HATTON, TRAVIS
STREET ADDRESS 1515 EAST MAIN STREET
CITY-ST-ZIP PAHOKEE FL 33476 ☐ Delete

TITLE S
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STREET ADDRESS 13600 S.W. Connors Hwy.
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)