

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 08, 2002 8:00 am**  
**Secretary of State**  
 05-08-2002 90151 021 \*\*\*150.00

**DOCUMENT # S02074**  
 1. Entity Name  
**FLORIDA AGRICULTURAL CORPORATION**

|  |  |
|--|--|
| Principal Place of Business<br><b>80 SW 8TH STREET<br/>         SUITE 3100<br/>         MIAMI FL 33130<br/>         US</b> | Mailing Address<br><b>80 SW 8TH STREET<br/>         SUITE 3100<br/>         MIAMI FL 33130<br/>         US</b> |
|--|--|



DO NOT WRITE IN THIS SPACE

|                                |         |                     |         |
|--------------------------------|---------|---------------------|---------|
| 2. Principal Place of Business |         | 3. Mailing Address  |         |
| Suite, Apt. #, etc.            |         | Suite, Apt. #, etc. |         |
| City & State                   |         | City & State        |         |
| Zip                            | Country | Zip                 | Country |

|   |   |  |
|---|---|--|
| 4. FEI Number<br><b>65-0236021</b>  | Applied For<br><input type="checkbox"/> | Not Applicable<br><input type="checkbox"/> |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |   |  |

**6. Name and Address of Current Registered Agent**

**BEFELER, GEORGE ESQ  
 80 SW 8TH ST  
 SUITE 3100  
 MIAMI FL 33130**

**7. Name and Address of New Registered Agent**

|  |
|--|
| Name   |
| Street Address (P.O. Box Number is Not Acceptable) |
| City   |
| State <b>FL</b> 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

4/29/02

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**

| 11. OFFICERS AND DIRECTORS |  | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |                            |
|----------------------------|--|---|----------------------------|
| TITLE NAME                 | STREET ADDRESS CITY-ST-ZIP   | TITLE NAME  | STREET ADDRESS CITY-ST-ZIP |
| <b>D</b>                   | <b>DUTARI, GRACIELA S<br/>CALLE AQUILLANO DE LA GUARDIA NO. 8<br/>EDIFICIO INGRA, PANAMA</b> |   |                            |
|                            |  |   |                            |
|                            |  |   |                            |
|                            |  |   |                            |
|                            |  |   |                            |
|                            |  |   |                            |
|                            |  |   |                            |
|                            |  |   |                            |

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

4/13/02

(309)  
 536-8856

Date

Daytime Phone #

CR2E034 (9/01)