

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90048 034 ***158.75

0242336
 A.V.

DOCUMENT # S02886
 1. Entity Name
CARAMBOLA FARMS, INC.

Principal Place of Business Mailing Address
150 WEST FLAGLER ST. **P.O. BOX 522397**
SUITE 2200 **MIAMI FL 33152-2397**
MIAMI FL 33130 **US**



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

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0220112** Applied For
 Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
FREED, OWEN S.
150 WEST FLAGLER STREET
2200 MUSEUM TOWER
MIAMI FL 33130

7. Name and Address of New Registered Agent
 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 _____ (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	
TITLE	D <input type="checkbox"/> Delete
NAME	FREED, OWEN S.
STREET ADDRESS	150 WEST FLAGLER ST.
CITY-ST-ZIP	MIAMI FL
TITLE	DV <input type="checkbox"/> Delete
NAME	BIOCCHI, FRANCO
STREET ADDRESS	150 W FLAGLER STREET
CITY-ST-ZIP	MIAMI FL
TITLE	DV <input type="checkbox"/> Delete
NAME	GUARDAZZI, REMO
STREET ADDRESS	150 W FLAGLER STREET
CITY-ST-ZIP	MIAMI FL
TITLE	V <input type="checkbox"/> Delete
NAME	BIOCCHI, FRANCO JR
STREET ADDRESS	150 W FLAGLER STREET
CITY-ST-ZIP	MIAMI FL
TITLE	V <input type="checkbox"/> Delete
NAME	GUARDAZZI, SERGIO
STREET ADDRESS	150 W FLAGLER STREET
CITY-ST-ZIP	MIAMI FL
TITLE	ST <input type="checkbox"/> Delete
NAME	CURATOLO, MARIA V
*STREET ADDRESS	150 W FLAGLER STREET
CITY-ST-ZIP	MIAMI FL

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Maria V. Curatolo* - **ST. Maria V. Curatolo** 4/5/02 305-592-9264
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)