2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 20, 2001 8:00 am
Secretary of State
05-16-2001 90038 040 ***150.00

8128

DOCUMENT # S62784

1. Entity Name
KENNECO PRODUCE WHOLESALERS, INC.

(UR)

Principal Place of Business	Mailing Address
1255 W ATLANTIC BLVD POMPANO BEACH FL 33069	1255 W ATLANTIC BLVD POMPANO BEACH FL 33069

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

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0269135 ☐ 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
HYMAN, BRAD 3487 HIATUS ROAD SUNRISE FL	Name Cheryl M. Hyman Street Address (P.O. Box Number is Not Acceptable) 1255 West Atlantic Blvd. City Pompano Bch. FL Zip Code 33069

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] Cheryl M. Hyman 6/15/01
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, 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PST HYMAN, BRAD 3487 HIATUS ROAD SUNRISE FL 33351	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Cheryl M. Hyman 1255 West Atlantic Blvd. Ste C-11 Pompano Bch., FL 33069	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HYMAN, BRAD 3487 HIATUS ROAD SUNRISE FL 33351	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Cheryl M. Hyman 1255 West Atlantic Blvd, Ste C-11 Pompano Bch., FL 33069	☑ Change ☐ Addition
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CR2E034 (10/00)

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] 5/1/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #