

03 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 429881 AMENDED	
1. Entity Name Okun Produce International, Inc.	

FILED

03 JUL 21 AM 8:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3301 N.W. 125th St.	3. Mailing Address 600 Citadel Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State Miami, FL	City & State Commerce, CA	4. FEI Number 59-1469638	Applied For ☐ Not Applicable
Zip 33167	Country DADE	Zip 90040	Country Los Angeles

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Stephen Trocke
Street Address (P.O. Box Number is Not Acceptable) 3301 N.W. 125 St.
City Miami
State FL
Zip Code 33167

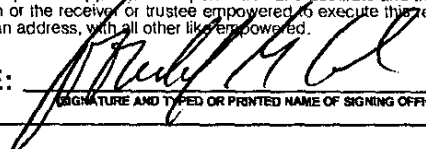
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 *Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Director, Pres. CEO - Ross E. Roeder 600 Citadel Drive Commerce, CA 90040	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	400021703694 07/21/03--01047--004 **61.25
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Dir. Exec. Vice Pres.- Robert Schofield 4343 E. Fremont St. Stockton, CA 95215	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Dir. Sr.V.P., Sec. - Donald G. Alvarado 600 Citadel Drive Commerce, CA 90040	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Dir., Sr. V.P., CFO & Treas. Richard N. Phegley 600 Citadel Drive Commerce, CA 90040	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:  Donald G. Alvarado, Secretary 7/11/03 (323) 869-7699

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/1/22

CR2E0345 (12/02)