

Date:03/17/2023 10:17:51

Sulawesi

Please review the registration.								
Created Date	Created by							
2023-03-17 09:13:16.0	lpd54084							
Registration Expiration Date	Registration Renewed Date							
2024-12-31								
Last Modified by								
lpd54084								
Last Updated								
2023-03-17								
Last Modified by Company	Registration Status							
PT Grand Kakao Indonesia	VALID							
Is this facility engaged in the manufacturing/processing, packing, or ho	olding of food for human or animal consumption in the United States?							
⊙ Yes ONo								
Are you a fishing vessel engaged in processing (21 CFR 1.226(f))?								
OYes								
Section 1: Type of Registration								
Facility Location: Foreign Registration								
Initial Registration 11736020718 Pin No Adb6B7CG								
Are you the new owner of a previously registered facility?								
OYes •No								
Previous Owner's Title:								
Previous Owner's Name:								
Previous Owner's Registration Number:								
Section 2: Facility Name/Address Information	<u> </u>							
Facility Name	Telephone Number							
PT Grand Kakao Indonesia	062 411 4723188							
Facility Name Suffix	Fax Number							
Company								
Facility Street Address, Line 1	E-Mail Address							
JL Kima 8 Kav. SS No. 21 dan Kav. SS No. 23C	siskasalubongga@grandkakaoindonesia.com							
Facility Street Address, Line 2	Unique Facility Identifier (UFI)							
Kawasan Kima Industri, Daya, Biringkanaya	673324915							
City								
Kota Makassar								
State/Province/Territory								



Zip Code (Postal Code)

90241

Country/Area

INDONESIA

Section 3: Preferred Mailing Address Information

Complete this section if different from Section 2 Facility Name/Address Information (OPTIONAL)

Is the preferred mailing address the same as the facility address (Section 2)? Yes

Name Telephone Number

PT Grand Kakao Indonesia 062 411 4723188

Address, Line 1 Fax Number

JL Kima 8 Kav. SS No. 21 dan Kav. SS No. 23C

Address, Line 2 E-Mail Address

Kawasan Kima Industri, Daya, Biringkanaya siskasalubongga@grandkakaoindonesia.com

City

Kota Makassar

State/Province/Territory

Sulawesi

Zip Code (Postal Code)

90241

Country/Area

INDONESIA

Section 4: Parent Company Name/Address Information

(If applicable and if different	from Continua 2 and 2)	If information is the same	an another coeffor	ahaale which acations
or applicable and it different	from Sections 7 and 5).	n mormanon is the same	as anomer section.	check which section:

• Same as Facility Address (Section 2)

OSame as Preferred Mailing Address (Section 3)

ONone of the above

Company Name Telephone Number

PT Grand Kakao Indonesia 062 411 4723188

Company Name Suffix Fax Number

Company

Address, Line 1 E-Mail Address

JL Kima 8 Kav. SS No. 21 dan Kav. SS No. 23C siskasalubongga@grandkakaoindonesia.com

Address, Line 2

Kawasan Kima Industri, Daya, Biringkanaya

City

Kota Makassar

State/Province/Territory

Sulawesi



Fort Mill

Zip Code (Postal Code)	14.0
90241	
Country/Area INDONESIA	
Section 5: Facility Emergency Contact Information	
If information is the same as another section, check which section:	
OSame as Facility Address (Section 2)	
●Same as U.S. Agent Information (Section 7)	
ONone of the above	
Individual's Title (Optional)	Emergency Contact Phone 001 908 6700751
Individual's Name (Optional)	E-Mail Address
Lauren	lpdagency@gmail.com
Individual's Middle Name (Optional)	Job Title (Optional)
Individual's Last Name (Optional)	
DeKoker	
Section 6: Trade Names	
Are there alternate trade names used by your facility in addition to the natural OYes ONo	ame provided in Section 2: Facility Name/Address Information?
Section 7: United States Agent	
(To be completed by facilities located outside any state or territory of the	United States, District of Columbia, or The Commonwealth of Puerto Rico)
U.S. Agent ID	Emergency Contact Phone
USID6828812	908 6700751
First Name	Fax Number
Lauren	,0
Middle Name (Optional)	E-Mail Address
	lpdagency@gmail.com
Last Name	
DeKoker	
Title (Optional)	
Address, Line 1	
110 Edge Hill Dr	
Address, Line 2	
City	



The Code (Postal Code) 19715 Country/Area INITEO STATES Inection 8: Seasonal Facility Dates of Operation (Optional) Size the approximate dates that your facility is open for business, if its operations are on a seasonal basis (Optional). Idanvest 1 Sizer thorith End Month Indianated 2 Start Month End Month Indianated 3 Indianated 4 Indianated 5 Indianated 5 Indianated 5 Indianated 6 Indianated 7 Indianated 8 Ind	Harvest 2 Start Month Section 9: General Product Categories - Human/Animal/Both Food for Human Consumption Section 9a: General Product Categories - Food for Human Consumption: Section 9a: General Product Categories - Food for Human Consumption; and Type of Activity Conducted at the Facility To be completed by Ambient Food all food facilities. You be completed by Ambient Food all food facilities. You have described by Ambient Food all food facilities. You have described by Instructions for (e.g., storage (e.g., storage (e.g., storage)) You have described by Instructions for (e.g., storage (e.g., storage)) NONE OF THE storage tanks, grain storage tanks,) Selection 10: Owner, Operator, or Agent-in-Charge Information Section 10: Owner, Operator, or Agent-in-Charge Information Frozen Food Activity Conducted at the Facilities, Information is the same as another section of the form, check which section: If information is the same as Section 2, check the box: OSacction 3 - Preferred Mailing Address Information Cateriors Frozen Food Activity Conducted at the Food Activity Conducted at the Food Activity Conducted at the Facility Conducted at the Facility Process Food Conveys and Food Process Incompleted by Activity Conducted at the Facility Process Food Conveys and Food Conveys and Facility Process Food Conveys and Food	State/Province/T	erritory												
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Section 4 - Parent Company Address Information	OSection 4 - Parent Company Address Information	4. Co													
					n										
JSection 7 - US Agent Address Information	OSection 7 - US Agent Address Information			Information											



Name of Entity or Individual Who is the Owner, Operator, or Agent-in-Charge: PT Grand Kakao Indonesia

Address, Line 1 Telephone Number

JL Kima 8 Kav. SS No. 21 dan Kav. SS No. 23C 062 411 4723188

Address, Line 2 Fax Number

Kawasan Kima Industri, Daya, Biringkanaya

City E-Mail Address

Kota Makassar siskasalubongga@grandkakaoindonesia.com

State/Province/Territory

Sulawesi

Zip Code (Postal Code)

90241

Country/Area

INDONESIA

Section 11: Inspection Statement

☑FDA will be permitted to inspect the facility at the time and in the manner permitted by the Federal Food, Drug, and Cosmetic Act.

Section 12: Certification Statement

The owner, operator, or agent-in-charge of the facility, or an individual authorized by the owner, operator, or agent-in-charge of the facility, must submit this form. By submitting this form to FDA, or by authorizing an individual to submit this form to FDA, the owner, operator, or agent-in-charge of the facility certifies that the above information is true and accurate. An individual (other than the owner, operator or agent-in-charge of the facility) who submits the form to the FDA also certifies that the above information submitted is true and accurate and that he/she is authorized to submit the registration on the facility's behalf. An individual authorized by the owner, operator, or agent-in-charge must below identify by name the individual who authorized submission of the registration. Under 18 U.S.C 1001, anyone who makes a materially false, fictitious, or fraudulent statement to the U.S. Government is subject to criminal penalties.

NAME OF PERSON SUBMITTING THIS REGISTRATION FORM: Lauren DeKoker

CHECK ONE BOX

Oa. INDIVIDUAL ASSOCIATED WITH THE INFORMATION IN SECTION 10 (STOP HERE, FORM IS COMPLETED)

OB. ANOTHER AUTHORIZED INDIVIDUAL

Address Information for the Authorizing Individual:

☑Same as Section 10

Individual's Name Telephone Number

PT Grand Kakao Indonesia 062 411 4723188

Address, Line 1 Fax Number

JL Kima 8 Kav. SS No. 21 dan Kav. SS No. 23C

Address, Line 2 E-Mail Address

Kawasan Kima Industri, Daya, Biringkanaya siskasalubongga@grandkakaoindonesia.com

City

Kota Makassar



State/Province/Territory

Sulawesi

Zip Code (Postal Code)

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