

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003476

Entity Name: COSTA CAROLINA, INC.

FILED  
Apr 19, 2007  
Secretary of State

## Current Principal Place of Business:

1468 BEAR CREEK ROAD  
LEICESTER, NC 28748

## New Principal Place of Business:

## Current Mailing Address:

22290 S.W. 162ND AVENUE  
GOULDS, FL 33170

## New Mailing Address:

FEI Number: 73-1635516

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COSTA NURSERY FARMS, INC.  
22290 S.W. 162ND AVENUE  
GOULDS, FL 33170 US

## Name and Address of New Registered Agent:

SUAREZ, ALBERTO J  
22290 S.W. 162ND AVENUE  
GOULDS, FL 33170 US

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: ALBERTO J. SUAREZ

04/19/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SMITH, MARIA C  
Address: 22290 S.W. 162ND AVENUE  
City-St-Zip: GOULDS, FL 33170

Title: VP ( ) Delete  
Name: SMITH, JOSE I  
Address: 22290 S.W. 162ND AVENUE  
City-St-Zip: GOULDS, FL 33170

Title: T ( ) Delete  
Name: SUAREZ, ALBERTO J  
Address: 22290 S.W. 162ND AVENUE  
City-St-Zip: GOULDS, FL 33170

Title: S ( ) Delete  
Name: COSTA, JOSE A III  
Address: 22290 S.W. 162ND AVENUE  
City-St-Zip: GOULDS, FL 33170

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SMITH, JOSE I  
Address: 22290 S.W. 162ND AVENUE  
City-St-Zip: GOULDS, FL 33170

Title: VP (X) Change ( ) Addition  
Name: COSTA, JOSE A III  
Address: 22290 S.W. 162ND AVENUE  
City-St-Zip: GOULDS, FL 33170

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: SMITH, MARIA C  
Address: 22290 S.W. 162ND AVENUE  
City-St-Zip: GOULDS, FL 33170

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALBERTO J. SUAREZ

T

04/19/2007

Electronic Signature of Signing Officer or Director

Date