

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Oct 10, 2011
Secretary of State**

DOCUMENT# N08000002895

Entity Name: SOW A SEED,INC.

Current Principal Place of Business:14601 SABAL DRIVE
MIAMI, FL 33014**New Principal Place of Business:****Current Mailing Address:**14601 SABAL DRIVE
MIAMI, FL 33014**New Mailing Address:**

FEI Number: 26-2178983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:APAID, CLAUDIA
14601 SABAL DRIVE
MIAMI, FL 33014 US**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:**Title: P
Name: APAID, CLAUDIA
Address: 14601 SABAL DRIVE
City-St-Zip: MIAMI, FL 33014Title: VP
Name: ALKHAL, SANDRINE
Address: 13295 SW 102ND STREET
City-St-Zip: MIAMI, FL 33186Title: T
Name: DOURA, CHRISTIE
Address: 1900 NORTH BAYSHORE DRIVE #2811
City-St-Zip: MIAMI, FL 33132Title: S
Name: GONZALEZ, DAPHNEE
Address: 967 SW 112TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33025Title: D
Name: MANUEL MARTINO, ANAISE
Address: 7285 SW 90TH STREET APT 310
City-St-Zip: MIAMI, FL 33156Title: D
Name: SALOMON, SABRINA
Address: 15100 NE 2 AVENUE
City-St-Zip: MIAMI, FL 33162

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CLAUDIA APAID

P

10/10/2011

Electronic Signature of Signing Officer or Director_____
Date