

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000077933

Entity Name: FRUITS.COM, INC.**Current Principal Place of Business:**241 SEVILLA AVENUE
CORAL GABLES, FL 33134**Current Mailing Address:**241 SEVILLA AVENUE
CORAL GABLES, FL 33134 US**FEI Number:** 65-1033642**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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:** CT CORPORATION SYSTEM

04/15/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name LE STIR, RONAN
Address 241 SEVILLA AVENUE
City-State-Zip: CORAL GABLES FL 33134

Title VP
Name HABIB, MURTAZA
Address 241 SEVILLA AVENUE
City-State-Zip: CORAL GABLES FL 33134

Title TREASURER
Name THOMPSON, PETER M.
Address 241 SEVILLA AVENUE
City-State-Zip: CORAL GABLES FL 33134

Title SECRETARY
Name VICENTE, MONICA
Address 241 SEVILLA AVENUE
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR
Name SCHURAD, SUSANNE
Address 241 SEVILLA AVENUE
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR
Name CERIOLI, ANNUNCIATA (NUCCI)
Address 241 SEVILLA AVENUE
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR
Name LE STIR, RONAN
Address 241 SEVILLA AVENUE
City-State-Zip: CORAL GABLES FL 33134

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

SIGNATURE: RONAN LE STIR

PRESIDENT

04/15/2021

Electronic Signature of Signing Officer/Director Detail

Date