


2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

Amended

FILED

04 AUG 16 AM 8:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 481063		
1. Entity Name NUM FONG PRODUCE, INC.		

Principal Place of Business 355 NE 72ND TERR MIAMI, FL 33138	Mailing Address 355 NE 72ND TERR MIAMI, FL 33138
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



08112004 Chg-P CR2E034 (10/03)

4. FEI Number 59-1644392		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent FONG, JEAN 10555 NORTHEAST THIRD COURT MIAMI SHORES, FL 33138		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 reinstating) DATE _____

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S- FONG, JUDY <input checked="" type="checkbox"/> Delete 674 NE 83RD AVE MIAMI SHORES, FL 33138	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 700040429517 08/23/04--01068--012 **\$61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOUIE, K Y <input type="checkbox"/> Delete 674 NE 83RD ST MIAMI, FL 00000,	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LOUIE, K. Y. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 674 NE 83RD ST. MIAMI, FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FONG, JEAN <input type="checkbox"/> Delete 10555 NE 3RD COURT MIAMI SHORES, FL 00000,	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD FONG, JEAN <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 10555 NE 3RD COURT MIAMI SHORES, FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S- ENG, JAMES <input checked="" type="checkbox"/> Delete 10555 NE 3RD COURT MIAMI SHORES, FL 33138	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 	8-11-04	305-757-1398
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #