

2003 **2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT (AR)**

**FILED**  
**Apr 25, 2005 8:00 am**  
**Secretary of State**

04-25-2005 90215 020 \*\*\*\*61.25

**DOCUMENT # F04000007307**



1. Entity Name

AMERICA HARVEST INC.

Principal Place of Business

445 NINTH PLACE  
VERO BEACH FL 32960

Mailing Address

445 NINTH PLACE  
VERO BEACH FL 32960



2. Principal Place of Business

345 West 37th St.  
Suite, Apt. #, etc.

3. Mailing Address

4045 Sheridan Ave  
#226  
Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/04)

City & State

Miami Beach FL

City & State

Miami Beach FL

4. FEI Number

13-3593893

Applied For

Not Applicable

Zip

33140

Country

Dade

Zip

33140

Country

Dade

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

~~PALIT, HELEN  
445 NINTH PLACE  
VERO BEACH FL 32960~~

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
4045 Sheridan Ave #226  
City Miami Beach FL Zip Code 33140

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

*Helen Palit*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE P  
NAME VERDVIN PALIT, HELEN ☐ Delete  
STREET ADDRESS 445 NINTH PLACE  
CITY-ST-ZIP VERO BEACH FL 32960

TITLE V  
NAME BERNSTEIN, DAVID ☐ Delete  
STREET ADDRESS 919 THIRD AVE.  
CITY-ST-ZIP NEW YORK NY 10022

TITLE S  
NAME SAPERS, CRISTINA ☐ Delete  
STREET ADDRESS 919 THIRD AVE.  
CITY-ST-ZIP NEW YORK NY 10022

TITLE T  
NAME NORTON, RICHARD ☐ Delete  
STREET ADDRESS 655 MADISON AVE.  
CITY-ST-ZIP NEW YORK NY 10021

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition  
NAME Verduin Palit  
STREET ADDRESS 4045 Sheridan Ave #226  
CITY-ST-ZIP Miami Beach, FL 33140.

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 617, 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:

*Helen Palit*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/18/05/ 786-247-6015