

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000007307

FILED
Apr 15, 2006
Secretary of State

Entity Name: AMERICA HARVEST INC.

Current Principal Place of Business:

345 WEST 37TH STREET
MIAMI BEACH, FL 33140

New Principal Place of Business:

4045 SHERIDAN AVE
226
MIAMI BEACH, FL 33140

Current Mailing Address:

4045 SHERIDAN AVE.
226
MIAMI BEACH, FL 33140

New Mailing Address:

4045 SHERIDAN AVE
226
MIAMI BEACH, FL 33140

FEI Number: 13-3593893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALIT, HELEN
4045 SHERIDAN AVE
226
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

PALIT, HELEN V
4045 SHERIDAN AVE
226
MIAMI BEACH, FL 33140 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: HELEN PALIT

04/15/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VERDUIN, PALIT
Address: 4045 SHERIDAN AVE. # 226
City-St-Zip: MIAMI BEACH, FL 33140

Title: V () Delete
Name: BERNSTEIN, DAVID
Address: 919 THIRD AVE.
City-St-Zip: NEW YORK, NY 10022

Title: S () Delete
Name: SAPERS, CRISTINA
Address: 919 THIRD AVE.
City-St-Zip: NEW YORK, NY 10022

Title: T () Delete
Name: NORTON, RICHARD
Address: 655 MADISON AVE.
City-St-Zip: NEW YORK, NY 10021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PALIT, HELEN V
Address: 4045 SHERIDAN AVE# 226
City-St-Zip: MIAMI BEACH, FL 33140

Title: V (X) Change () Addition
Name: BERNSTEIN, DAVID
Address: 919 THIRD AVE
City-St-Zip: NEW YORK, NY 10022

Title: S (X) Change () Addition
Name: SAPERS, CRISTINE
Address: 919 THIRD AVE
City-St-Zip: NEW YORK, NY 10022

Title: T (X) Change () Addition
Name: NORTON, RICHARD
Address: 655 MADISON AVE
City-St-Zip: NEW YORK, NY 10021

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

SIGNATURE: HELEN PALIT

P

04/15/2006

Electronic Signature of Signing Officer or Director

Date