2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 28, 2009
Secretary of State

DOCUMENT# F18585

Entity Name: AMERICAN FRESH FRUITS CORPORATION

Current Principal Place of Business:

2655 LE JEUNE RD
STE 1015
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2655 LE JEUNE RD
STE 1015
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 59-2055661 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CONSULTING SERVICES OF S. FLORIDA, INC.
2121 PONCE DE LEON BLVD
STE 1050
CORAL GABLES, FL 33134 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: PTD ( ) Delete
Name: CADAVID, JORGE
Address: 2655 LE JEUNE RD., STE 1015
City-St-Zip: CORAL GABLES, FL 33134

Title: SD ( ) Delete
Name: TRUJILLO, JUAN D
Address: 2655 LE JEUNE RD., STE 1015
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete
Name: HENAO, NATALIA
Address: 2655 LE JEUNE RD., STE 1015
City-St-Zip: CORAL GABLES, FL 33134

Title: PD ( ) Delete
Name: HENRIQUEZ, VICTOR CEO
Address: 2655 LE JEUNE RD SUITE 1015
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: MARTINEZ, SANTIAGO
Address: 2655 LE JEUNE RD., STE 1015
City-St-Zip: CORAL GABLES, FL 33134

Title: S (X) Change ( ) Addition
Name: TRUJILLO, JUAN D
Address: 2655 LE JEUNE RD., STE 1015
City-St-Zip: CORAL GABLES, FL 33134

Title: TAS (X) Change ( ) Addition
Name: HENAO, NATALIA
Address: 2655 LE JEUNE RD., STE 1015
City-St-Zip: CORAL GABLES, FL 33134

Title: P (X) Change ( ) Addition
Name: HENRIQUEZ, VICTOR CEO
Address: 2655 LE JEUNE RD SUITE 1015
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NATALIA HENAO TAS 05/28/2009

Electronic Signature of Signing Officer or Director — Date