

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G96166

FILED  
Apr 08, 2010  
Secretary of State

Entity Name: GONZALEZ BROS. HARVESTING, INC.

**Current Principal Place of Business:**

37318 BRANCH AVE  
DADE CITY, FL 33526

**New Principal Place of Business:**

37318 BRANCH AVE  
DADE CITY, FL 33526 US

**Current Mailing Address:**

P.O. BOX 1392  
DADE CITY, FL 33526

**New Mailing Address:**

P.O. BOX 1392  
DADE CITY, FL 33526 US

FEI Number: 59-2396538

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

GONZALEZ, MARCELO  
37318 BRANCH AVE.  
DADE CITY, FL 33523 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GONZALEZ, MARCELO  
Address: 37318 BRANCH AVE.  
City-St-Zip: DADE CITY, FL 33523

Title: VSD  
Name: GONZALEZ, NOE  
Address: GASKIN AVE.  
City-St-Zip: DADE CITY, FL

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: MARCELO GONZALEZ SR

P

04/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date