

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H77122

FILED  
Jan 09, 2007  
Secretary of State

Entity Name: ARTURO DE LEON FRUIT HARVESTING, INC.

**Current Principal Place of Business:**

25700 SW 212TH AVE  
HOMESTEAD, FL 330311543 US

**New Principal Place of Business:**

**Current Mailing Address:**

25700 SW 212TH AVE  
HOMESTEAD, FL 330311543

**New Mailing Address:**

FEI Number: 59-2599284

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DE LEON, HILDA S  
25700 S.W. 212 AVE  
HOMESTEAD, FL 33031 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 ( ) Delete  
Name: DE LEON, ARTURO  
Address: 25700 SW 212TH AVE  
City-St-Zip: HOMESTEAD, FL 330311543

Title: ST ( ) Delete  
Name: DE LEON, HILDA S  
Address: 25700 SW 212TH AVE  
City-St-Zip: HOMESTEAD, FL 330311543

Title: VP ( ) Delete  
Name: DE LEON, ARNOLD  
Address: 30105 SW 202 AVE  
City-St-Zip: HOMESTEAD, FL 33030

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

SIGNATURE: HILDA S DE LEON

ST

01/09/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date