

**2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L01000008378

**FILED**  
**Jul 10, 2007**  
**Secretary of State****Entity Name:** C FARMS LLC**Current Principal Place of Business:**2378 W 80 ST  
UNIT 7  
HIALEAH, FL 33016**New Principal Place of Business:****Current Mailing Address:**PO BOX 5032  
MIAMI LAKES, FL 33014**New Mailing Address:****FEI Number:** 65-1105557**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**GARZA, ROBIN  
2378 W 80 ST  
HIALEAH, FL 33016 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WHITE WATER INTERNAT, IONAL, INC.  
Address: 633 OLD DIXIE HIGHWAY  
City-St-Zip: SEBASTIAN, FL 32958

Title: MGRM ( ) Delete  
Name: GARZA, ROBIN  
Address: 2378 W 80 ST  
City-St-Zip: HIALEAH, FL 33016

Title: MGRM ( ) Delete  
Name: HESSE, RALPH C  
Address: 2378 W 80 ST  
City-St-Zip: HIALEAH, FL 33016

Title: MGRM ( ) Delete  
Name: TRADE WIND INDUSTRIE, S, LTD.  
Address: PO BOX 286  
City-St-Zip: PROVIDENIALES, TC BWI

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: GARZA, PHILIP S  
Address: PO BOX 5032  
City-St-Zip: MIAMI LAKES, FL 33014

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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROBIN GARZA

MGRM

07/10/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date