

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M04883

FILED
Apr 21, 2008
Secretary of State

Entity Name: AGRO DEVELOPMENT CORPORATION

Current Principal Place of Business:

11860 W STATE ROAD 84
B-15
DAVIE, FL 33325 US

New Principal Place of Business:

502 PARSLEY COURT
KISSIMMEE, FL 34759 US

Current Mailing Address:

11860 W STATE ROAD 84
B-15
DAVIE, FL 33325 US

New Mailing Address:

502 PARSLEY COURT
KISSIMMEE, FL 34759 US

FEI Number: 59-2441878

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLAN, AMNON
11860 W. STATE RD 84
SUITE B-15
DAVIE, FL 33325 US

Name and Address of New Registered Agent:

GOLAN, AMNON
502 PARSLEY COURT
KISSIMMEE, FL 34759 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:

04/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: SHAKED, SHMUEL
Address: 11860 W. STATE RD. 84, B-15
City-St-Zip: DAVIE, FL 33325

Title: PSD () Delete
Name: GOLAN, AMNON
Address: 11860 W. STATE RD. 84, B-15
City-St-Zip: DAVIE, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: SHAKED, SHMUEL
Address: 502 PARSLEY COURT
City-St-Zip: KISSIMMEE, FL 34759

Title: PSD (X) Change () Addition
Name: GOLAN, AMNON
Address: 502 PARSLEY COURT
City-St-Zip: KISSIMMEE, FL 34759

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: AMNON GOLAN

P

04/21/2008

Electronic Signature of Signing Officer or Director

Date