2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005943

FILED May 01, 2004 Secretary of State

Entity Name: FRESH HARVEST INTERNATIONAL MINISTRIES CORPORATION

Current Principal Place of Business: New Principal Place of Business: 5026 PLYMOUTH ST SUITE 7 JACKSONVILLE, FL 32205 **Current Mailing Address: New Mailing Address:** 5026 PLYMOUTH ST SUITE 7 JACKSONVILLE, FL 32205 FEI Number: 45-0518860 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CARDONA, VICTOR M 5026 PLYMOUTH ST SUITE 7 JACKSONVILLE, FL 32205 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete CARDONA, VICTOR M Name: Name: 1205 IONIA STREET Address: Address: City-St-Zip: JACKSONVILLE, FL 32206 City-St-Zip: Title: () Delete Title: () Change () Addition Name: CARDONA, CYNTHIA M Name: Address: 1205 IONIA STREET Address: City-St-Zip: JACKSONVILLE, FL 32206 City-St-Zip: Title: () Delete Title: (X) Change () Addition MCGHEE, ELLIS L Name: TAYLOR, ANGELA L Name: 3430 SHAUNA OAKS DRIVE 14156 CRESTWICK DRIVE WEST Address: Address: City-St-Zip: JACKSONVILLE, FL 32277 City-St-Zip: JACKSONVILLE, FL 32218 Title: () Delete Title: D (X) Change () Addition BRASHEARS, FRANK E III Name: Name: MARTI, HONORIO 10759 LIPPIZAN DRIVE Address: 1105 CARLOTTA ROAD WEST Address: City-St-Zip: JACKSONVILLE, FL 32211 City-St-Zip: JACKSONVILLE, FL 32257 Title: () Delete Title: (X) Change () Addition WILLIAMS, TONDA Y SIMPSON, PRISCILLA Name: Name: 2600 ART MUSEUM DR APT 30 4207 CONFEDERATE ROAD Address: Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: JACKSONVILLE, FL 32210

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CYNTHIA M CARDONA DV 05/01/2004