

# **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000053510

Entity Name: TOMATOES PLUS, INC.

**FILED**  
**Jan 26, 2007**  
**Secretary of State**

## **Current Principal Place of Business:**

114 NEW MARKET ROAD  
IMMOKALEE, FL 34142 US

## **New Principal Place of Business:**

100 MADISON AVE E  
IMMOKALEE, FL 34142 US

## **Current Mailing Address:**

PO BOX 1648  
IMMOKALEE, FL 34143 US

## **New Mailing Address:**

FEI Number: 65-1014818      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ACEVEDO, JUAN  
114 NEW MARKET ROAD  
IMMOKALEE, FL 34142 US

## **Name and Address of New Registered Agent:**

ACEVEDO, JUAN  
100 MADISON AVE E  
IMMOKALEE, FL 34142 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: JUAN ACEVEDO

01/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: ACEVEDO, JUAN R  
Address: PO BOX 1648  
City-St-Zip: IMMOKALEE, FL 34143 US

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

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: JUAN ACEVEDO

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01/26/2007

Electronic Signature of Signing Officer or Director

Date