

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000058155

Entity Name: HORTIFRUT BERRIES, INC.

FILED
Jun 29, 2005
Secretary of State

Current Principal Place of Business:

2241 TRADE CENTER WAY, STE. A
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

2241 TRADE CENTER WAY, STE. A
NAPLES, FL 34109

New Mailing Address:

FEI Number: 59-3662369

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEXIS DOCUMENT SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: CO () Delete
Name: MOLLER, VICTOR
Address: AV 11 DE SEPTIEMBRE 1860 PISO 9
City-St-Zip: SANTIAGO, CHILE,

Title: P () Delete
Name: SHELFORD, JOHN E
Address: 8203 LOUBANK DRIVE
City-St-Zip: NAPLES, FL 34109

Title: VPAS () Delete
Name: BECK, ARIBEL AGUIRRE
Address: 21277 WAYMOUTH PKWY
City-St-Zip: ESTERO, FL 33928

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

SIGNATURE: ARIBEL AGUIRRE-BECK

VPAS

06/29/2005

Electronic Signature of Signing Officer or Director

Date