

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000058155

FILED
Oct 12, 2006
Secretary of State**Entity Name:** HORTIFRUT BERRIES, INC.**Current Principal Place of Business:**999 VANDERBILT BEACH RD.
SUITE 102
NAPLES, FL 34108**New Principal Place of Business:****Current Mailing Address:**999 VANDERBILT BEACH RD.
SUITE 102
NAPLES, FL 34108**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

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: 9970 ROOKERY CIRCLE
City-St-Zip: ESTERO, FL 33928

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: DIR () Change (X) Addition
Name: RUIZ, EDMUNDO
Address: 999 VANDERBILT BEACH ROAD
City-St-Zip: NAPLES, FL 34108

Title: DIR () Change (X) Addition
Name: VENEZIAN, LORENZO
Address: 999 VANDERBILT BEACH ROAD
City-St-Zip: NAPLES, FL 34108

Title: BOA () Change (X) Addition
Name: HORTIFRUT SA,
Address: 999 VANDERBILT BEACH ROAD
City-St-Zip: NAPLES, FL 34108

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: ARIBEL AGUIRRE-BECK

VPAS

10/12/2006

Electronic Signature of Signing Officer or Director

Date