

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000069985

FILED
Sep 10, 2007
Secretary of State

Entity Name: FLORANNIE FARMS U.S.A., CORP.

Current Principal Place of Business:

2924 NW. 72 AVE
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

801 BRICKELL KEY BLVD
1101
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-1025009 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORANNIE FARMS
2924 NW. 72 AVE
MIAMI, FL 33122 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: MARTINEZ, FERNANDO E
Address: 2924 NW 72 AVE
City-St-Zip: MIAMI, FL 33122

Title: MGR () Delete
Name: ARBOLEDA, MONICA MS
Address: 2924 NW 72 AVE
City-St-Zip: MIAMI, FL 33122

Title: MGR () Delete
Name: ARBOLEDA, FERNANDO MR
Address: 2924 NW 72 AVE
City-St-Zip: MIAMI, FL 33122

Title: MGR () Delete
Name: ARBOLEDA, JAVIER MR
Address: 2924 NW 72 AVE
City-St-Zip: MIAMI, FL 33122

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: () Change () Addition
Name:
Address:
City-St-Zip:

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: MONICA ARBOLEDA

MANG

09/10/2007

Electronic Signature of Signing Officer or Director

_____ Date