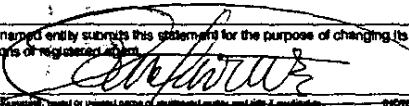
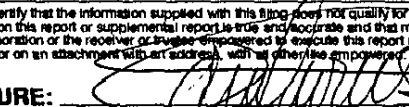


FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90095 024 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000087165			
1. Entity Name FRUITS & GIFTS, INC.			
Principal Place of Business 676 NW 34TH ST MIAMI, FL 33127		Mailing Address 676 NW 34TH ST MIAMI, FL 33127	
2. Principal Place of Business 3216 STIRLING RD.		3. Mailing Address 3216 STIRLING RD.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Hollywood, FL		City & State Hollywood, FL	
Zip 33021		Zip 33021	
Country BROWARD		Country BROWARD	
4. FEI Number 01-0722130		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SALAZAR, AUGUSTO X 676 NW 34TH ST MIAMI, FL 33127		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 3216 STIRLING RD. City Hollywood FL Zip Code 33021	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE 		DATE 4/20/03	
9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NO ☐ Delete		TITLE PRESIDENT ☒ Change ☐ Addition	
NAME SALAZAR, AUGUSTO X		NAME 3216 STIRLING RD.	
STREET ADDRESS 676 NW 34TH ST		STREET ADDRESS HOLLYWOOD FL 33021	
CITY-ST-ZIP MIAMI, FL 33127		CITY-ST-ZIP HOLLYWOOD FL 33021	
TITLE ☐ Delete		TITLE SECRETARY ☐ Change ☒ Addition	
NAME ROSARITO SALAZAR		NAME 3216 STIRLING RD.	
STREET ADDRESS 676 NW 34TH ST		STREET ADDRESS HOLLYWOOD FL 33021	
CITY-ST-ZIP MIAMI, FL 33127		CITY-ST-ZIP HOLLYWOOD FL 33021	
TITLE ☐ Delete		TITLE ☐ Change ☐ Addition	
NAME ☐ Delete		NAME ☐ Change ☐ Addition	
STREET ADDRESS ☐ Delete		STREET ADDRESS ☐ Change ☐ Addition	
CITY-ST-ZIP ☐ Delete		CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE ☐ Delete		TITLE ☐ Change ☐ Addition	
NAME ☐ Delete		NAME ☐ Change ☐ Addition	
STREET ADDRESS ☐ Delete		STREET ADDRESS ☐ Change ☐ Addition	
CITY-ST-ZIP ☐ Delete		CITY-ST-ZIP ☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 assignee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment to this report, with all other like empowered.			
SIGNATURE: 		DATE 4/20/03	