2004 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Apr 30, 2004 08:00 AM Secretary of State DOCUMENT # P01000094243 R & R HARVESTING, INC. Principal Place of Business Mailing Address 1707 2ND. AVE E 1707 2ND, AVE E PALMETTO, FL 34221 PALMETTO, FL 34221 04272004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1151557 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SMITH, ROBERT DO NOT WRITE 1707 2ND. AVE E PALMETTO, FL 34221 IN THIS SPACE 3. 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. Signature, typed or printed name of registered agent and site if applicable (NOTE. Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE 18 \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PD me SMITH, ROBERT JR. NAME STREET ADDRESS 1701 4TH AVENUE WEST — U00000143356 04/30/04~80087-017 150.00 PALMETTO, FL 34221 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TEDE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 eath; 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 in Block 10 or Block 11 if changed, or on an attachmegit with an address, with all other like empowered.

TITLE NAME STREET ADDRESS CSTY - ST - ZIP

Robert Smith JR