2005 FOR PROFIT CORPORATION ANNUAL REPORT

May 19, 2005 8:00 am Secretary of State **DOCUMENT # P02000035164** 05-19-2005 90044 003 ***158.75 AGRÓTEK FLORIDA CORP. Principal Place of Business Mailing Address HUU OT 12. 16424 SW 73 TERRACE 16424 SW 73 TERRACE MIAMI, FL 33193 MIAMI, FL 33193 2. Principal Place of Business 3. Mailing Address 15740 5W 101 STREET Suite, Apt. #, etc. Suite, Apt. #, etc. 05172005 Chg-P CR2E034 (10/03) Applied For City & State City & State 4. FEI Number TORIDA miam, 01-0651711 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BAEZ, CESAR A Street Address (P.O. Box Number is Not Acceptable) 16424 SW 73 TERRACE MIAMI, FL 33193 Zip Code City 8. The above named entity submits his 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 05-17-05 A. Rober esse. SIGNATURE. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. Added to Fees Due by September 7, 2005 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Addition TITLE ☐ Delete TITLE ☐ Change BAEZ, CESAR A NAME NAME STREET ADDRESS 16424 SW 73 TERRACE STREET ADDRESS MIAMI, FL 33193 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition ADAMES, FRANCISCO A NAME NAME STREET ADDRESS 16424 SW 73 TERRACE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33193 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition BLANDINO DE BAEZ, BELKIS J NAME NAME STREET ADDRESS 16424 SW 73 TERRACE STREET ADDRESS MIAMI, FL 33193 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition BLANDINO DE ADAMES, LELYS NAME NAME 16424 SW 73 TERRACE STREET ADDRESS STREET ADDRESS MIAMI, FL 33193 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplies with this filling 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 supplies of all poor 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 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 attachment with an address, with all other like empowered. 586-4915 Cesan d. Bon SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

FILED