

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000062274

Entity Name: EMERALD FRUIT CORP.

FILED
Aug 05, 2008
Secretary of State

Current Principal Place of Business:

850 N MIAMI AVE # 2006
MIAMI, FL 33136

New Principal Place of Business:

850 N MIAMI AVE
2006
MIAMI, FL 33136

Current Mailing Address:

14312 SW 103RD TERRACE
MIAMI, FL 33186

New Mailing Address:

PO BOX 166335
MIAMI, FL 331166335 US

FEI Number: 98-0379655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVAREZ, CARLOS
14312 SW 103 TR
MIAMI, FL 33186 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: PD () Delete
Name: BAHAMONDE, CARMITA
Address: 850 N MIAMI AVE #2006
City-St-Zip: MIAMI, FL 33136

Title: VP () Delete
Name: BAHAMONDE, MENTOR N
Address: 850 N. MIAMI AVENUE 2006
City-St-Zip: MIAMI, FL 33136

Title: VP (X) Delete
Name: ALVAREZ, CARLOS A MS, MBA
Address: 14312 SW 103RD TERRACE
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BAHAMONDE, CARMITA MRS
Address: 850 N MIAMI AVENUE # 2006
City-St-Zip: MIAMI, FL 33136 US

Title: VP (X) Change () Addition
Name: BAHAMONDE, MENTOR N MR
Address: 850 N. MIAMI AVENUE # 2006
City-St-Zip: MIAMI, FL 33136 US

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: CARMITA BAHAMONDE

PD

08/05/2008

Electronic Signature of Signing Officer or Director

Date