

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P02000111256

Entity Name: ACOSTA PRODUCE INC.

**FILED**  
**Nov 19, 2007**  
**Secretary of State****Current Principal Place of Business:**815 NW 32 AVENUE  
MIAMI, FL 33125**New Principal Place of Business:****Current Mailing Address:**10379 NW 30 TERRACE  
MIAMI, FL 33172**New Mailing Address:**

FEI Number: 20-2255598

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**BUSTAMANTE, MARIA L  
10379 NW 30 TERRACE  
MIAMI, FL 33172 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: P ( ) Delete  
Name: BUSTAMANTE, MARIA L  
Address: 10379 NW 30 TERRACE  
City-St-Zip: MIAMI, FL 33172Title: VP, (X) Delete  
Name: ACOSTA, VICTOR  
Address: 10379 NW 30 TERRACE  
City-St-Zip: MIAMI, FL 33172**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**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: MARIA L BUSTAMANTE

P

11/19/2007

Electronic Signature of Signing Officer or Director

Date