

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000068629

FILED
Apr 29, 2004
Secretary of State

Entity Name: TROPICAL FOODS TO USA, INC.

Current Principal Place of Business:

125 79 NW 10 COURT
SUNRISE, FL 33323 US

New Principal Place of Business:

1500 WESTON ROAD SUITE 208
WESTON, FL 33326 US

Current Mailing Address:

125 79 NW 10 COURT
SUNRISE, FL 33323 US

New Mailing Address:

1500 WESTON ROAD SUITE 208
WESTON, FL 33326 US

FEI Number: 20-0066712

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTILLA, HERBERT
125 79 NW 10 COURT
SUNRISE, FL 33323 US

Name and Address of New Registered Agent:

CASTILLA, JUAN V
100 GOLDEN ISLES DRIVE APT 1106
HALLANDALE, FL 33009 US

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: JUAN V. CASTILLA

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CASTILLA, HERBERT
Address: 125 79 NW 10 COURT
City-St-Zip: SUNRISE, FL 33323 US

Title: VP () Delete
Name: CASTILLA, JUAN V
Address: 125 79 NW 10 COURT
City-St-Zip: SUNRISE, FL 33323 US

Title: ST () Delete
Name: JIMENEZ, MIRIAM L
Address: 125 79 NW 10 COURT
City-St-Zip: SUNRISE, FL 33323 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CASTILLA, JUAN
Address: 100 GOLDEN ISLES DRIVE APT. 1106
City-St-Zip: HALLANDALE, FL 33009 US

Title: ST (X) Change () Addition
Name: JIMENEZ, MYRIAM L
Address: 100 GOLDEN ISLES DRIVE APT. 1106
City-St-Zip: HALLANDALE, FL 33009 US

Title: VP (X) Change () Addition
Name: DANGOND, ROBERTO
Address: 1500 WESTON ROAD SUITE 208
City-St-Zip: WESTON, FL 33326 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JUAN V. CASTILLA

P

04/29/2004

Electronic Signature of Signing Officer or Director

Date