2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2009
Secretary of State

DOCUMENT# P03000071978

Entity Name: WORLD PRODUCE MARKETING CORP.

Current Principal Place of Business:

6355 SHADOW TREE LANE
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

6355 SHADOW TREE LANE
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 16-1674812 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEINTRAUB, PETER B
2650 NORTH MILITARY TRAIL
150
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

WEINTRAUB, PETER B
2700 NORTH MILITARY TRAIL
355
BOCA RATON, FL 33431 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: 04/11/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LEFEVRE, KARL
Address: 6355 SHADOW TREE LANE
City-St-Zip: LAKE WORTH, FL 33463

Title: S, T ( ) Delete
Name: LEFEVRE, LISA
Address: 6355 SHADOW TREE LANE
City-St-Zip: LAKE WORTH, FL 33463

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: LISA LEFEVRE S,T 04/11/2009
Electronic Signature of Signing Officer or Director — Date