Sent By: ACCOUNTING OFFICES; + ; Ju

FILED
Jul 25, 2005 8:00 am
Secretary of State
07-25-2005 90096 018 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000083153

1. Entity Name
MOOREHAVEN FARMS, INC.

50057233

Principal Place of Business	Mailing Address
18100 SW 50TH ST FT LAUDERDALE, FL 33331	18100 SW 50TH ST FT LAUDERDALE, FL 33331

DO NOT WRITE IN THIS SPACE

08302005 No Chg-P CR2E03

4. FEI Number
56-2380318

5. Certificate of Status Desired ☐ $6.75 Fee

6. Name and Address of Current Registered Agent

MOORE, ADRIENNE
18100 SW 50TH ST
FT LAUDERDALE, FL 33331

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8. 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. I am familiar with, and the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

FILE NOW!! FEE IS $150.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.1... corporation did not ...

10. OFFICERS AND DIRECTORS

TITLE	DPS
NAME	MOORE, ADRIENNE
STREET ADDRESS	18100 SW 50TH ST
CITY-ST-ZIP	FT LAUDERDALE, FL 33331
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing 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 supplemental report 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 above, or on an attachment with any address, with all other like empowered.

SIGNATURE: x Adrienne Moore x 7/18/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date