2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Jan 29, 2005 08:00 AM **DOCUMENT # P03000128707 Secretary of State** t. Entity Name HEIDRICH PRODUCE TRANSPORT, INC. Mailing Address Principal Place of Business 1504 CANARY STREET 1504 CANARY STREET LONGWOOD, FL 32750 LONGWOOD, FL 32750 01272005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 56-2412930 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HEIDRICH, DAVID G DO NOT WRITE 1504 CANARY STREET LONGWOOD, FL 32750 IN THIS SPACE 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 accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. U00000203165 29705-80018-022 158.75 TILL NAME HEIDRICH, DAVID G 1504 CANARY STREET STREET ADDRESS CITY-ST-ZIP LONGWOOD, FL 32750 ШŒ NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 12. I hereby certify that the information supplied with this filling 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 in Block 10 or Block 11 if 8308899