2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000015078

Entity Name: AGRIORGANIC, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7866 NW 46 ST 2 FLR MIAMI, FL 33166

Current Mailing Address: New Mailing Address:

7866 NW 46 ST 2 FLR 230 SW 117 TERRACE MIAMI, FL 33166 APT.# 203

PEMBROKE PINES, FL 33025

FEI Number: 20-0660930 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PENA, MARGIORY C
7866 NW 46 ST 2 FLR
230 SW 117 TERRACE

MIAMI, FL 33166 US APT.# 203
PEMBROKE PINES, FL 331025 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: MARGIORY CARRILLO 04/30/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 CARRILLO, VICTOR
 Name:
 CARRILLO, VICTOR

 Address:
 2163 NW 141 AVE
 Address:
 230 SW 117 TERRACE. APT # 203

 City-St-Zip:
 PEMBROKE PINES, FL 33028
 City-St-Zip:
 PEMBROKE PINES, FL 33025

Title: V () Delete Title: V (X) Change () Addition

Name: CARRILLO, HERNANDO Name: CARRILLO, HERNANDO

 Address:
 2163 NW 141 AVE
 Address:
 230 SW 117 TERRACE. APT # 203

 City-St-Zip:
 PEMBROKE PINES, FL 33028
 City-St-Zip:
 PEMBROKE PINES, FL 33025

Title: D () Delete Title: () Change () Addition

 Name:
 CARRILLO, JUAN
 Name:

 Address:
 1991 NW 188 AVE
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33029
 City-St-Zip:

 Title:
 () Delete
 Title:
 D
 () Change (X) Addition

 Name:
 Name:
 PENA, MARGIORY C

 Address:
 Address:
 230 SW 117 TERRACE. APT # 203

 City-St-Zip:
 City-St-Zip:
 PEMBROKE PINES, FL 33025

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: MARGIORY CARRILLO PENA D 04/30/2007