

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000048758

FILED
Apr 19, 2005
Secretary of State

Entity Name: FRUTVEN OF FLORIDA, INC.

Current Principal Place of Business:

6712 DAIRY ROAD
ZEPHYRHILLS, FL 33542

New Principal Place of Business:

4810 WEST MARTINLUTHER KING BLVD
UNIT A-9
TAMPA, FL 33614

Current Mailing Address:

6712 DAIRY ROAD
ZEPHYRHILLS, FL 33542

New Mailing Address:

4810 WEST MARTINLUTHER KING BLVD
UNIT A-9
TAMPA, FL 33614

FEI Number: 84-1642325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEON, RAFAEL
6712 DAIRY ROAD
ZEPHYRHILLS, FL 33542 US

Name and Address of New Registered Agent:

SALAS, MARIAELENA
4810 MARTIN LUTHER BLVD
UNIT A-9
TAMPA, FL 33614 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: MARIAELENA SALAS

04/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MENDEZ, FERMIN
Address: 6712 DAIRY ROAD
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: T () Delete
Name: LEON, RAFAEL
Address: 6712 DAIRY ROAD
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: S () Delete
Name: CRUZ, MARIA G
Address: 6712 DAIRY ROAD
City-St-Zip: ZEPHYRHILLS, FL 33542

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SALAS, RAFAEL
Address: 4810 WEST MARTIN LUTHER KING BLVD
City-St-Zip: TAMPA, FL 33614

Title: T (X) Change () Addition
Name: SALAS, MARIAELENA
Address: 4810 MARTIN LUTHER KING BLVD
City-St-Zip: TAMPA, FL 33614

Title: S (X) Change () Addition
Name: SALAS, MARIELA G
Address: 4810 MARTIN LUTHER KING BLVD
City-St-Zip: TAMPA, FL 33614

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: RAFAEL SALAS

P

04/19/2005

Electronic Signature of Signing Officer or Director

Date