2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000048758

Entity Name: FRUTVEN OF FLORIDA, INC.

FILED Apr 19, 2005 Secretary of State

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

6712 DAIRY ROAD 4810 WEST MARTINLUTHER KING BLVD ZEPHYRHILLS, FL 33542

UNIT A-9

TAMPA, FL 33614

Current Mailing Address: New Mailing Address:

6712 DAIRY ROAD 4810 WEST MARTINLUTHER KING BLVD

UNIT A-9 ZEPHYRHILLS, FL 33542

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: Name and Address of New Registered Agent:

LEON, RAFAEL SALAS, MARIAELENA 6712 DAIRY ROAD 4810 MARTIN LUTHER BLVD

ZEPHYRHILLS, FL 33542 US 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

MENDEZ, FERMIN Name: Name: SALAS, RAFAEL 6712 DAIRY ROAD 4810 WEST MARTIN LUTHER KING BLVD Address: Address:

TAMPA, FL 33614 City-St-Zip: ZEPHYRHILLS, FL 33542 City-St-Zip:

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

Name: LEON, RAFAEL Name: SALAS, MARIAELENA

6712 DAIRY ROAD 4810 MARTIN LUTHER KING BLVD Address: Address: ZEPHYRHILLS, FL 33542 TAMPA, FL 33614 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete CRUZ, MARIA G SALAS, MARIELA G Name: Name:

6712 DAIRY ROAD 4810 MARTIN LUTHER KING BLVD Address: Address:

City-St-Zip: ZEPHYRHILLS, FL 33542 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.

Ρ SIGNATURE: RAFAEL SALAS 04/19/2005