

PD000/09242

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

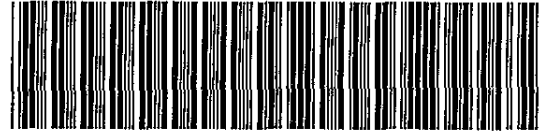
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000066647590

02/27/06--01017--019 **35.00

FILED
06 FEB 27 PM 3:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA - Chang
Syl

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WILD FRUITS INC.
(Name of Corporation)

DOCUMENT NUMBER: PO 4000109242

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SERGIO FIALLO
(Name of Contact Person)

WILD FRUITS INC
(Firm/Company)

521 NW 23 COURT
(Address)

MIAMI FL 33125
(City/State and Zip Code)

For further information concerning this matter, please call:

SERGIO FIALLO at (305) 297-6969
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: WILD FRUITS, INC.
2. The principal office address: 2983 S.W. 7th Street, MIAMI, FL 33135
3. The mailing address (if different): 20500 W. COUNTRY CLUB DRIVE, #615
AVENTURA, FL 33180
4. Date of incorporation/qualification: 7/22/2004 Document number: #P04000109242
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

LISA RIVERA

20500 W. COUNTRY CLUB DRIVE, #615
AVENTURA, FL 33180

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

SERGIO FIALLO

521 N.W. 23rd COURT


(P.O. Box NOT acceptable)

MIAMI, FL 33125

FILED
06 FEB 27 PM 3:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Registered agent.

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

LISA RIVERA, PRESIDENT & SECRETARY
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

(Signature of Registered Agent)

2/12/06
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

*** * * FILING FEE: \$35.00 * * ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)