

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000109804

1. Entity Name
AG FARMS, INC.



Principal Place of Business
23040 S.W. 187 AVENUE
HOMESTEAD, FL 33170

Mailing Address
23040 S.W. 187 AVENUE
HOMESTEAD, FL 33170

FILED
Feb 26, 2007 08:00 A
Secretary of State



02032007 No Chg-P CR2E034 (11/05)

4. FEI Number
03-0546086

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GONZALEZ, ARTURO
23040 S.W. 187 AVENUE
HOMESTEAD, FL 33170

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when registering) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00** May Be
Added to Fees

U000000649886

03/07/07-80070-014 158.75

10. OFFICERS AND DIRECTORS

TITLE PD
NAME GONZALEZ, ARTURO
STREET ADDRESS 23040 S.W. 187 AVENUE
CITY-ST-ZIP HOMESTEAD, FL 33170

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Arturo Gonzalez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

✓ Feb. 21, 07 ✓ 305-247-9718
Date Daytime Phone #