

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000056726

Entity Name: AGRIVEST MANAGEMENT, INC.

FILED
Sep 05, 2006
Secretary of State

Current Principal Place of Business:

19495 BISCAYNE BLVD STE 608
AVENYURA, FL 33180

New Principal Place of Business:

19495 BISCAYNE BLVD STE 608
AVENTURA, FL 33180

Current Mailing Address:

19495 BISCAYNE BLVD STE 608
AVENYURA, FL 33180

New Mailing Address:

19495 BISCAYNE BLVD STE 608
AVENTURA, FL 33180

FEI Number: 20-4677847

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAVAGE, CRAIG D
801 NE 167TH ST STE 302
N MIAMI BCH, FL 33162 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SHERMAN, JASON
Address: 19495 BISCAYNE BLVD STE 608
City-St-Zip: AVENYURA, FL 33180

Title: DS () Delete
Name: PHILLIPS, EVAN
Address: 19495 BISCAYNE BLVD STE 608
City-St-Zip: AVENYURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SHERMAN, JASON
Address: 19495 BISCAYNE BLVD STE 608
City-St-Zip: AVENTURA, FL 33180

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JASON SHERMAN

DP

09/05/2006

Electronic Signature of Signing Officer or Director

Date