

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000069602

Entity Name: FRUIT N VEGIE 4 LIFE, INC.

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

6520 NW 41ST TERRACE
COCONUT CREEK, FL 33073

New Principal Place of Business:

309 LAKE ESTATE DR
CHAPIN, SC 29036

Current Mailing Address:

6520 NW 41ST TERRACE
COCONUT CREEK, FL 33073

New Mailing Address:

309 LAKE ESTATE DR
CHAPIN, SC 29036

FEI Number: 20-2852330

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRUIT N VEGGIE 4 LIFE, INC
C/O CHARLENE CANYES
6520 NW 41ST TERR
POMPAN0 BEACH, FL 33073 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CANYES, CHARLENE A
Address: 6520 NW 41ST TERRACE
City-St-Zip: COCONUT CREEK, FL 33073

Title: D (X) Delete
Name: CANYES, EDWARD M
Address: 6520 NW 41ST TERR
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CANYES, CHARLENE A
Address: 309 LAKE ESTATE DR
City-St-Zip: CHAPIN, SC 29036

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

I hereby certify that the information supplied with this filing does not qualify 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: CHARLENE CANYES

D

04/22/2009

Electronic Signature of Signing Officer or Director

Date