

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000065053

FILED
Mar 24, 2009
Secretary of State

Entity Name: WOLF SEEDS ORGANIC, INC.

Current Principal Place of Business:

2747 DORELL AVENUE
ORLANDO, FL 32814

New Principal Place of Business:

2747 DORELL AVENUE
ORLANDO, FL 32814 US

Current Mailing Address:

20 N ORLANDO AVE STE 600
ORLANDO, FL 32801

New Mailing Address:

20 NORTH ORANGE AVENUE
SUITE 600
ORLANDO, FL 32801 US

FEI Number: 20-4967407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDRY, STONER, CALANDRINO & BROWN, P.A.
20 N ORANGE AVE STE 600
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

HENDRY, STONER & BROWN, P.A.
20 N ORANGE AVENUE
SUITE 600
ORLANDO, FL 32801 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: HENDRY, STONER & BROWN, P.A.

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WOLF, ALEXANDER
Address: RUA DO PROFESSOR #600, APOL 142
City-St-Zip: RIBEIRAO PRETO-SP, BRAZIL,

Title: D () Delete
Name: WOLF, PETER
Address: 100 S EOLA DR APT 806
City-St-Zip: ORLANDO, FL 32801

Title: D () Delete
Name: WOLF, SAMUEL
Address: 100 S EOLA DR APT 806
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WOLF, ALEXANDER
Address: RUA DO PROFESSOR #600, APOL 142
City-St-Zip: RIBEIRAO PRETO-SP, OC BRAZIL

Title: VSTD (X) Change () Addition
Name: WOLF, PETER
Address: 1325 LAKE SHADOW CIRCLE #12308
City-St-Zip: MAITLAND, FL 32751 US

Title: D (X) Change () Addition
Name: WOLF, SAMUEL
Address: 2747 DORELL AVENUE
City-St-Zip: ORLANDO, FL 32814 US

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: PETER WOLF

VSTD

03/24/2009

Electronic Signature of Signing Officer or Director

Date