

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000087241

FILED
May 02, 2008
Secretary of State

Entity Name: GUSTAVO'S FRESH PRODUCE CORP.

Current Principal Place of Business:

6700 NW 4TH CT.
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

6700 NW 4TH CT.
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 20-5158159

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSAS, GUSTAVO
235 ANTILLAS AV.
#1
CORAL GABLES, FL 33134 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: P () Delete
Name: BASALO, ELIZABETH
Address: 6700 NW 4TH CT.
City-St-Zip: PLANTATION, FL 33317

Title: VP () Delete
Name: ROSAS, GUSTAVO
Address: 235 ANTILLAS AV. #1
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ELIZABETH BASALO

P

05/02/2008

Electronic Signature of Signing Officer or Director

_____ Date