

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000019062

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: FLORIDA FARMLAND COMPANY INC

## Current Principal Place of Business:

11600 NE 101 ST STREET  
OKEECHOBEE, FL 34972 US

## New Principal Place of Business:

## Current Mailing Address:

6531 HAYES STREET  
HOLLYWOOD, FL 33024 US

## New Mailing Address:

FEI Number: 20-8450530

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NOOR, SAMINA  
6531 HAYES STREET  
HOLLYWOOD, FL 33024 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: P ( ) Delete  
Name: NOOR, SAMINA  
Address: 6531 HAYES STREET  
City-St-Zip: HOLLYWOOD, FL 33024 US

Title: VP ( ) Delete  
Name: SADIA, MAMUN  
Address: 8607 BREEZY OAK WAY  
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: D ( ) Delete  
Name: GULNAZ, SUHAG  
Address: 660 THORNBRIDGE AVE  
City-St-Zip: DAVIE, FL 33325 US

Title: D ( ) Delete  
Name: TANZILA, ISLAM  
Address: 6531 HAYES STREET  
City-St-Zip: HOLLYWOOD, FL 33024 US

Title: D ( ) Delete  
Name: AZAM, MOHAMMED M  
Address: 1720 SW 137 WAY  
City-St-Zip: MIRAMAR, FL 33027 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: SAMINA NOOR

P

04/28/2008

Electronic Signature of Signing Officer or Director

Date