

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000068474

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: SIMON VALLEY GROWERS, CORP.

## Current Principal Place of Business:

601 AL DON FARMING RD.  
CLEWISTON, FL 33440

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 952795  
LAKE MARY, FL 32795

## New Mailing Address:

PO BOX 952792  
LAKE MARY, FL 32795

FEI Number: 26-0618961

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ORTIZ, ROBERTO J ESQ.  
536 BILTMORE WAY  
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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: GONZALEZ BURGOS, VALDEREZ  
Address: 4451 NW 36TH STREET, SUITE #101  
City-St-Zip: MIAMI, FL 33166

Title: VPD ( ) Delete  
Name: BURGOS DE GONZALEZ, TEMAQUEN  
Address: 4451 NW 36TH STREET, SUITE #101  
City-St-Zip: MIAMI, FL 33166

Title: SD ( ) Delete  
Name: MENDOZA, OSCAR  
Address: 4451 NW 36TH STREET, SUITE #101  
City-St-Zip: MIAMI, FL 33166

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: GONZALEZ BURGOS, VALDEREZ  
Address: 601 AL DON FARMING RD.  
City-St-Zip: CLEWISTON, FL 33440

Title: VPD (X) Change ( ) Addition  
Name: BURGOS DE GONZALEZ, TEMAQUEN  
Address: 601 AL DON FARMING RD.  
City-St-Zip: CLEWISTON, FL 33440

Title: SD (X) Change ( ) Addition  
Name: MENDOZA, OSCAR  
Address: 601 AL DON FARMING RD.  
City-St-Zip: CLEWISTON, FL 33440

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: VALDEREZ GONZALEZ

MRS

04/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date