

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000041216

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Entity Name:** QUALITY FRESH TROPICALS, CORP.

**Current Principal Place of Business:**

9714 SW 132 ST  
MIAMI, FL 33176

**New Principal Place of Business:**

9714 SW 132 ST  
MIAMI, FL 33176 UN

**Current Mailing Address:**

9714 SW 132 ST  
MIAMI, FL 33176

**New Mailing Address:**

9714 SW 132 ST  
MIAMI, FL 33176 UN

**FEI Number:** 27-2568176

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ORAMA, PEDRO  
9714 SW 132 ST  
MIAMI, FL 33176 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

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** ORAMA, PEDRO  
**Address:** 9714 SW 132 ST  
**City-St-Zip:** MIAMI, FL 33176

**Title:** VP  
**Name:** ORAMA, PEDRO L  
**Address:** 9714 SW 132 STREET  
**City-St-Zip:** MIAMI, FL 33176 US

I hereby 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 all other like empowered.

**SIGNATURE:** PEDRO ORAMA

PD

01/06/2012

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

\_\_\_\_\_  
Date