2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2008
Secretary of State

DOCUMENT# P93000011346

Entity Name: EQUITOR FARM, INC.

Current Principal Place of Business:

12251 N.W. 18TH AVENUE
CITRA, FL 32113

New Principal Place of Business:

Current Mailing Address:

12251 N.W. 18TH AVENUE
CITRA, FL 32113

New Mailing Address:

FEI Number: 59-3175183 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TORTORA, BEVERLEY
12251 N.W. 18TH AVENUE
CITRA, FL 32113 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: TORTORA, EMANUEL
Address: 600 SW 69 AVE
City-St-Zip: PEMBROKE PINES, FL 33023 US

Title: VP ( ) Delete
Name: TORTORA, JACQUELINE
Address: 600 SW 69 AVE
City-St-Zip: PEMBROKE PINES, FL 33023 US

Title: VP ( ) Delete
Name: TORTORA, STEVEN
Address: 12251 NW 18 AVE
City-St-Zip: CITRA, FL 32113 US

Title: VPST ( ) Delete
Name: TORTORA, BEVERLEY
Address: 12251 NW 18 AVE
City-St-Zip: CITRA, FL 32113 US

Title: VP ( ) Delete
Name: TORTORA, RICHARD
Address: 12253 NW 18 AVE
City-St-Zip: CITRA, FL 32113 US

Title: VP ( ) Delete
Name: TORTORA, MARY
Address: 12253 NW 18 AVE
City-St-Zip: CITRA, FL 32113 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:

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: BEVERLEY TORTORA VPST 01/06/2008

Electronic Signature of Signing Officer or Director — Date