2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2009
Secretary of State

DOCUMENT# P93000088844

Entity Name: SOUTH FLORIDA TROPICAL PLANTS, INC.

Current Principal Place of Business:

2807 NORTH UNIVERSITY DR.
HOLLYWOOD, FL 33024 US

New Principal Place of Business:

Current Mailing Address:

2807 NORTH UNIVERSITY DR.
HOLLYWOOD, FL 33024 US

New Mailing Address:

FEI Number: 65-0456725 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCOFIELD, GARY JAMES
2807 NORTH UNIVERSITY DR.
HOLLYWOOD, FL 33023 US

Name and Address of New Registered Agent:

SCOFIELD, GARY JAMES
2807 NORTH UNIVERSITY DR.
HOLLYWOOD, FL 33024 US

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: 01/07/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: SCOFIELD, DAVID JOHN
Address: 11321 NW 62 COURT
City-St-Zip: HOLLYWOOD, FL 33021

Title: DV ( ) Delete
Name: SCOFIELD, GARY JAMES
Address: 7760 NW 15 COURT
City-St-Zip: PEMBROKE PINES, FL 33024

Title: DST ( ) Delete
Name: SCOFIELD, KATHRYN ANN
Address: 7760 NW 15 COURT
City-St-Zip: PEMBROKE PINES, FL 33024

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:

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: DAVID J SCOFIELD PRES 01/07/2009
Electronic Signature of Signing Officer or Director — Date