


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 08:00 AM
Secretary of State

DOCUMENT # H65997
 1. Entity Name
 AGROSISTEMAS DE AMERICA, INC.



Principal Place of Business 6415 SW 127TH PL MIAMI, FL 33183 US	Mailing Address 6415 SW 127TH PL MIAMI, FL 33183 US
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DO NOT WRITE IN THIS SPACE



04102005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0038708	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent
 CRUZ, VLADIMIR
 6415 S.W. 127TH PL.
 MIAMI, FL 33183

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6. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST CRUZ, VLADIMIR 6415 S.W. 127TH PL. MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CRUZ, LOURDES 6415 SW 127TH PL MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CRUZ, IGNACIO 10601 S.W. 73RD AVE. MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 04/20/05-80053-016 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Vladimir A. Cruz* VLADIMIR A. CRUZ Date: 4/11/05 Daytime Phone #: 305-3826122