2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 171517

Entity Name: DEL MONTE FRESH PRODUCE N.A., INC.

Current Principal Place of Business:

241 SEVILLA AVE.

CORAL GABLES. FL 33134

Current Mailing Address:

PO BOX 149222 ATTN: LEGAL DEPT

CORAL GABLES. FL 33114-9222 US

FEI Number: 59-0687405 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Apr 28, 2015

Secretary of State

CC0225314155

Officer/Director Detail:

Title D/P Title D/SV

Name EL-NAFFY, HANI Name RICE, PAUL J

Address 241 SEVILLA AVENUE, ATTN: LEGAL Address 241 SEVILLA AVENUE, ATTN: LEGAL

DEPT. DEPT.

CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title D/SV Title S/V/GC

Name LAZOPOULOS, EMANUEL Name JORDAN, BRUCE A

Address 241 SEVILLA AVENUE, ATTN: LEGAL Address 241 SEVILLA AVENUE, ATTN: LEGAL

DEPT. DEPT.

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title V/T/AS Title V/AT

Name THOMPSON, PETER M Name VICENTE, MONICA

Address 241 SEVILLA AVENUE, ATTN: LEGAL Address 241 SEVILLA AVENUE, ATTN: LEGAL

DEPT. DEPT.

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title CFO/SENIOR VICE PRESDIENT Title VP, ASST. SECRETARY
Name CONTRERAS, RICHARD Name TENAZAS, MARISSA R.

Address 241 SEVILLA AVENUE Address 241 SEVILLA AVENUE, ATTN: LEGAL

ATTN: LEGAL DEPT. DEPT.

City-State-Zip: CORALGABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

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: BRUCE A. JORDAN

SECRETARY

04/28/2015

Electronic Signature of Signing Officer/Director Detail

Date