

2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001076

Entity Name: CROPLIFE LATIN AMERICA, INC.**Current Principal Place of Business:**CSC-LAWYERS INCORPORATED SERVICE COMPANY
7 ST PAUL STREET SUITE 820
BALTIMORE, MD 21202**Current Mailing Address:**6703 NW 7TH ST
#SJO 40223
MIAMI, FL 33126 US**FEI Number:** 52-2290427**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PERDOMO, JOSE R
6703 NW 7TH ST
#SJO 40223
MIAMI, FL 33126 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:** JOSE R. PERDOMO

02/11/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name PERDOMO, JOSE R
Address 6703 NW 7TH ST
#SJO 40223
City-State-Zip: MIAMI FL 33126

Title D
Name ZEM, ANTONIO
Address 6703 NW 7TH ST
#SJO 40223
City-State-Zip: MIAMI FL 33126

Title T
Name DOS REIS VASQUES, GUSTAVO
Address 6703 NW 7TH ST
#SJO 40223
City-State-Zip: MIAMI FL 33126

Title FVC
Name PREZZI, FLAVIO
Address 6703 NW 7TH ST
#SJO 40223
City-State-Zip: MIAMI FL 33126

Title C
Name GIESEMANN, ROBERTO
Address 6703 NW 7TH ST
#SJO 40223
City-State-Zip: MIAMI FL 33126

Title DIRECTOR
Name ESTRADA, EDUARDO
Address 6703 NW 7TH ST - #SJO 40223
City-State-Zip: MIAMI FL 33126

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PERDOMO, JOSE R

PRESIDENT

02/11/2015

Electronic Signature of Signing Officer/Director Detail

Date