

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000051761

FILED
Mar 09, 2009
Secretary of State

Entity Name: ANDRI CHEMICAL OF AMERICA, INC.

Current Principal Place of Business:

2221 SW 59TH AVE
HOLLYWOOD, FL 33023

New Principal Place of Business:

Current Mailing Address:

2221 SW 59TH AVE
HOLLYWOOD, FL 33023

New Mailing Address:

FEI Number: 02-0691891 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ONDINA PEREZ-MENA
5424 SW 186TH WAY
MIRAMAR, FL 33029 US

Name and Address of New Registered Agent:

IRIBARREN, JOSE A
19380 COLLINS AVENUE
APT 121
SUNNY ISLES BEACH, FL 33160 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 A IRIBARREN

03/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PEREZ-MENA, ONDINA D
Address: 5424 SW 186TH WAY
City-St-Zip: MIRAMAR, FL 33029

Title: D () Delete
Name: PEREZ-MENA, LUIS
Address: 5424 SW 186TH WAY
City-St-Zip: MIRAMAR, FL 33029

Title: D () Delete
Name: PEREZ-MENA, MARGARITA
Address: 5424 SW 186TH WAY
City-St-Zip: MIRAMAR, FL 33029

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: IRIBARREN, JOSE A
Address: 19380 COLLINS AVENUE, APT 121
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: D (X) Change () Addition
Name: PEREZ-MENA, ONDINA D
Address: 9607 MOONSTONE MIST LANE
City-St-Zip: KATY, TX 77494

Title: D (X) Change () Addition
Name: PEREZ-MENA, LUIS
Address: 9607 MOONSTONE MIST LANE
City-St-Zip: KATY, TX 77494

Title: D () Change (X) Addition
Name: PEREZ-MENA, MARGARITA
Address: 9607 MOONSTONE MIST LANE
City-St-Zip: KATY, TX 77494

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: JOSE A IRIBARREN

D

03/09/2009

Electronic Signature of Signing Officer or Director

Date