2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000027156

Entity Name: PALM ORINOCO OIL COMPANY

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
C/O 6303 B SUITE 390 MIAMI, FL	LUE LAGOON 331266005	DRIVE			
Current Mailing Address:			New Mailir	New Mailing Address:	
C/O 6303 BLUE LAGOON DRIVE SUITE 390 MIAMI, FL 331266005					
FEI Number:	02-0799227	FEI Number Applied For ()	El Number Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
MARQUEZ & MARCELO-ROBAINA, P.A. 6303 BLUE LAGOON DRIVE, SUITE 390 MIAMI, FL 331266005 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:					
Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR					
Title: Name: Address: City-St-Zip:	DPT () I MORALES, ALOI 1300 SW 122 AV MIAMI, FL 3318	/ENUE APT. 422	Title: Name: Address: City-St-Zip:	DP (X) Change () Addition MORALES, ALONSO 6303 BLUE LAGOON DR. SUITE 390 MIAMI, FL 33126	
Title: Name: Address: City-St-Zip:	IRIARTE, MARIC	LAGOON DRIVE # 390	Title: Name: Address: City-St-Zip:	DVP (X) Change () Addition IRIARTE, MARIO 6303 BLUE LAGOON DRIVE # 390 MIAMI, FL 331266005	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	VP () Change (X) Addition IRIARTE, GERARDO 6303 BLUE LAGOON DR. SUITE 390 MIAMI, FL 33126	
Title: Name: Address: City-St-Zip:	()!	Delete	Title: Name: Address: City-St-Zip:	S () Change (X) Addition SUAREZ, CARMENZA 6303 BLUE LAGOON DR. SUITE 390 MIAMI, FL 33126	
Title: Name: Address: City-St-Zip:	()!	Delete	Title: Name: Address: City-St-Zip:	T () Change (X) Addition CORREA-URIBE, ENRIQUE 6303 BLUE LAGOON DR. SUITE 390 MIAMI, FL 33126	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	AS () Change (X) Addition IRIARTE, GLORIA C 6303 BLUE LAGOON DR. SUITE 390 MIAMI, FL 33126	

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: ALONSO MORALES P 04/26/2007