2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000008286

FILED Jan 12, 2009 Secretary of State

Entity Name: COMERCIAL ANDINA IMPORT & EXPORT CORPORATION

Current Principal Place of Business:			New Principal Place of Business:		
	LE JEUNE ROA	AD D			
31 IAMI, FL	33126				
urrent Mailing Address:			New Mailing Address:		
32 N.W.	LE JEUNE ROA	AD			
31 IAMI, FL	33126				
El Number: 65-0552986 FEI Number Applied For ()		FEI Number Not Applicable () Certificate of Status Desired ()			
ame and	d Address of C	urrent Registered Agent:	Name and Address of New Registered Agent:		
	PATRICIA LE JUENE ROA . 33126 US	AD #431			
ne above	e named entity s	submits this statement for the	purpose of changing	its registered	d office or registered agent, or both,
	e named entity s e of Florida.	submits this statement for the	purpose of changing	its registered	d office or registered agent, or both,
the Stat	e of Florida. RE:			its registered	d office or registered agent, or both,
the Stat	e of Florida. RE:	submits this statement for the ic Signature of Registered Ag		its registered	d office or registered agent, or both, Date
the Stat	e of Florida. RE: Electron			its registered	
the State	e of Florida. RE: Electron	ic Signature of Registered Ag	gent		
the State	e of Florida. RE: Electron mpaign Financing S AND DIREC D () NAZAR, PATRIC	ic Signature of Registered Ag	gent	NS/CHANGE	Date
the State IGNATU ection Cal FFICER tle: ame: ddress:	e of Florida. RE: Electron mpaign Financing S AND DIREC D () NAZAR, PATRIC 782 N.W. LE JU MIAMI, FL 3312 D () NAZAR, JUAN C	ic Signature of Registered Ag Trust Fund Contribution (). TORS: Delete CIA IENE ROAD #431 26 Delete CIENE ROAD #431	gent ADDITION Title: Name: Address:	NS/CHANGE D NAZAR, JUA	Date ES TO OFFICERS AND DIRECTOR () Change () Addition (X) Change () Addition N C E JUENE ROAD #431

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: PATRICIA NAZAR DIR 01/12/2009