2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000031099

Entity Name: BRASIF TAX FREE, INC.

MIAMI, FL 33178

City-St-Zip:

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3400 NW MIAMI, FL	114TH AVE 33178 US				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
3400 NW MIAMI, FL	114TH AVE 33178 US				
FEI Number	: 65-0608321	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address o	f New Registered Agent:	
KORIK, SI 3400 NW MIAMI, FL	114TH AVE				
	e named entity e of Florida.	submits this statement for the p	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	FILHO, JONAS RUA DA ASSEI) Delete B. C WBLEIA, NO. 31, 11TH FLOOR RO, BRAZIL, OC	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FAGUNDES, S RUA DA ASSEI) Delete ANTOS A WBLEIA, NO. 31, 11TH FLOOR RO, BRAZIL, OC	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	O (ERNESTO, CR 3400 NW 114 A MIAMI, FL 331	AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	S (KORIK, SILVAI 3400 NW 114T		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: SILVANA KORIK S 04/23/2009