2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000122479

Entity Name: DEL SUR FOODS CORPORATION

FILED Sep 10, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12502 SW 119 CT 1301 NW 89 CT MIAMI, FL 33186 221

MIAMI, FL 33172 US

Current Mailing Address: New Mailing Address:

12502 SW 119 CT 1301 NW 89 CT

MIAMI, FL 33186 221 MIAMI, FL 33172 US

FEI Number: 55-0906046 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

OMEGNA, EDUARDO A

1409 BIARRITZ DR

MIAMI BCH, FL 33141 US

BASILIO, JOSE D

1414 NW 107 AVENUE

206

MIAMI, FL 33172 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 D. BASILIO 09/10/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD
 () Delete
 Title:
 PD
 (X) Change () Addition

 Name:
 OMEGNA, EDUARDO A
 Name:
 MELLADO, JOSE A

 Address:
 1409 BIARRITZ DR
 Address:
 12502 SW 119 CT

 Address:
 1409 BIARRITZ DR
 Address:
 12502 SW 119 CT

 City-St-Zip:
 MIAMI BCH, FL 33141
 City-St-Zip:
 MIAMI, FL 33186 US

Title: PD (X) Delete Title: () Change () Addition

 Name:
 MELLADO, JOSE A
 Name:

 Address:
 12502 SW 119 CT
 Address:

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:

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. MELLADO PD 09/10/2007