

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002777

FILED  
Apr 26, 2008  
Secretary of State

Entity Name: EMBUTIDOS PALACIOS USA, INC.

**Current Principal Place of Business:**

45 ANTILLA AVE., #1-E  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

7224 NW 25TH STREET  
MIAMI, FL 33122 US

**New Mailing Address:**

FEI Number: 51-0386268      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SAN MARTIN, IVAN  
45 ANTILLA AVE., #1-E  
CORAL GABLES, FL 33134 US

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

SAN MARTIN, IVAN  
1450 BRICKELL BAY DR  
1211  
MIAMI, FL 33131 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

04/26/2008

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PALACIOS, FRANCISCO J  
Address: 45 ANTILLA AVE., #1-E  
City-St-Zip: CORAL GABLES, FL 33134

Title: V ( ) Delete  
Name: SANMARTIN, IVAN  
Address: 1450 S. BAYSHORE DRIVE, AP.1211  
City-St-Zip: MIAMI, FL 33131

Title: S ( ) Delete  
Name: PALACIOS, ANGEL P  
Address: 45 ANTILLA AVE., #1-E  
City-St-Zip: CORAL GABLES, FL 33134

Title: T ( ) Delete  
Name: PALACIOS, JAIME P  
Address: 45 ANTILLA AVE., #1-E  
City-St-Zip: CORAL GABLES, FL 33134

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: IVAN SAN MARTIN

Electronic Signature of Signing Officer or Director

VP

04/26/2008

Date