2008 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 30, 2008 8:00 am Secretary of State DOCUMENT # F93000005808 04-30-2008 90159 029 ***150.00 1. Entity Name PORTOBELLO AMERICA INC. Principal Place of Business Mailing Address 6003224R 1205 N MILLER 1205 N MILLER ANAHEIM, CA 92806 ANAHEIM, CA 92806 2. Principal Place of Business - No P.O. Box # 3. Mailing Address <u>1822 SW 2nd</u> 18zz sw 2nd St Suite, Apt. #, etc. Suite, Apt. #, etc. 02292008 CR2E034 (12/06) Chg-P City & State City & State 4. FEI Number Applied For Pempano Pombano Beach, FL Beach. 06-1299145 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired-33069 USA USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 П Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. COB ☐ Change Addition TITLE ☐ Delete TITLE GOMES, CESAR NAME RUA ANTONIO DIB MUSSI, 79 STREET ADDRESS STREET ADDRESS 88015.110 FLORIANOPOLIS SC, CITY-ST-ZIP CITY-ST-ZIP President & CEO Decio Magnam Change ☐ Addition **D** Delete TITLE TITLE STREADBECK, BRIAN NAME NAME STREET ADDRESS 9521 MARY CIRCLE STREET ADDRESS 648 NW 11 Way CITY-ST-7IP CJIY-SI-ZIP VILLA PARK, CA 92861 Coral Spring, FL. 25071 D Change ☐ Addition TITLE TITLE Delete BAPTISTA, MARIO NAME NAME STREET ADDRESS RUA ANTONIO DIB MUSSI, 79 STREET ADDRESS CITY-ST-ZIP 88015,110 FLORIANOPOLIS, CITY-ST-ZIP VP\$ Delete TITLE **Change** ☐ Addition TITLE PEREIRA, PAULO Rodolfo Jacobsen NAME NAME 7842 NW 124 Terrace 8 GRECO AISLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **IRVINE, CA 92614** CITY-ST-ZIP Parkland, FL. 33046 TITLE **Delete** TITLE ☐ Change ☐ Addition CORTE, GLAUCO NAME NAME **RUA CAP ROMMALES DE BARROS 705** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CASA 28 CARVOEIRA, UPS & CFO M Change ☐ Addition TITLE ☐ Delete NAME BREZINSKI, GLADIMIR Gladimir Brzezinski NAME 1205 N MILLER STREET STREET ADDRÉSS STREET ADDRESS 5801 NW 119 Terrace 12. I hereby certify that the information supplied with this filing does not qualify or the exemptions contained 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 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 root as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empoyers. 954-969-1616 SIGNATURE: Gladimir Brzezinski

OR DIRECTOR

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