2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 584955

Entity Name: EL BRAZO FUERTE ENTERPRISES, INC.

FILED Mar 19, 2009 Secretary of State

1697 S.W. 32ND AVE. 1697 S.W. 32ND AVE. MIAMI, FL 33145 US

Current Mailing Address: New Mailing Address:

1697 SW 32 AVENUE 1697 S.W. 32ND AVE. MIAMI, FL 33145 US

FEI Number: 59-1865915 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CAMACHO, JUANA 3160 SW 19TH STREET MIAMI, FL 33145 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 Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 CAMACHO, JUANA
 Name:
 CAMACHO, JUANA

 Address:
 3160 SW 19TH STREET
 Address:
 3160 SW 19TH STREET

City-St-Zip: MIAMI, FL 33145 City-St-Zip: MIAMI, FL 33145 US

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

 Name:
 CAMACHO, JUANA,
 Name:
 JUANA, CAMACHO

 Address:
 3160 S.W. 19TH STREET
 Address:
 3160 S.W. 19TH STREET

 Address:
 3160 S.W. 19TH STREET

 City-St-Zip:
 MIAMI, FL 33145

 City-St-Zip:
 MIAMI, FL 33145 US

Title: VT () Delete Title: VT (X) Change () Addition Name: CAMACHO, ESVER, Name: CAMACHO, ESVER

Address: 3170 S.W. 19TH ST

City-St-Zip: MIAMI, FL 33145

CAMACHO, ESVER

Address: 3170 S.W. 19TH ST

City-St-Zip: MIAMI, FL 33145

City-St-Zip: MIAMI, FL 33145

City-St-Zip: MIAMI, FL 33145

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

 Name:
 CAMACHO, EDGAR,
 Name:
 CAMACHO, EDGAR

 Address:
 3170 S.W. 19TH ST
 Address:
 3170 S.W. 19TH ST

 City-St-Zip:
 MIAMI, FL 33145
 City-St-Zip:
 MIAMI, FL 33145

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: JUANA CAMACHO PD 03/19/2009