

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003196

Entity Name: HOJA DE CUERO S.A.

FILED
Apr 09, 2009
Secretary of State

Current Principal Place of Business:

38430 TIMBERLANE DRIVE
UMATILLA, FL 32784

New Principal Place of Business:

Current Mailing Address:

38430 TIMBERLANE DRIVE
UMATILLA, FL 32784

New Mailing Address:

FEI Number: 98-0336245

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RHODES, ANNA S D
38430 TIMBERLANE DR.
UMATILLA, FL 32784 US

Name and Address of New Registered Agent:

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:

Title: PCD () Delete
Name: RHODES JR, WILLIAM M
Address: 38430 TIMBERLANE DR.
City-St-Zip: UMATILLA, FL 32784

Title: STD () Delete
Name: RHODES, ANNA S
Address: 38430 TIMBERLANE DR.
City-St-Zip: UMATILLA, FL 32784

Title: D () Delete
Name: RHODES III, WILLIAM M
Address: 3200 PABLO CREEK WAY
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: RHODES, ROBERT P
Address: 2315 OVERLOOK DRIVE
City-St-Zip: MOUNT DORA, FL 32557

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: ANNA S RHODES

STD

04/09/2009

Electronic Signature of Signing Officer or Director

Date