2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008
Secretary of State

DOCUMENT# F05000004488

Entity Name: ZAFIRO VALORES SOCIEDAD DE CORRETAJE DE TITULOS VALORES, C.A. CO.

Current Principal Place of Business:

AV. LIBERTADOR, ENTRE CALLE LA JOYA Y ELIC
EDIF.CENTRO PARIMA, PISO 9, OFIC 901
CHACAO, CARACAS, VE 00000 VE

New Principal Place of Business:

Current Mailing Address:

MC 01-224, 8401 N.W. 17TH STREET
PO BOX 599025
MIAMI, FL 33126

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

O&P TAX-ACCOUNTING CORP.
11890 S.W. 8TH STREET
PENTHOUSE VII
MIAMI, FL 331841717 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: CPT ( ) Delete
Name: PARDO, ANTONIO J
Address: AV. LIBERTADOR, ENTRE CALLE LA JOYA Y ELIC
City-St-Zip: CHACAO, CARACAS, VE 00000 VE

Title: VCVP ( ) Delete
Name: MEDINA, GUSTAVO A
Address: AV. LIBERTADOR, ENTRE CALLE LA JOYA Y ELIC
City-St-Zip: CHACAO, CARACAS, VE 00000 VE

Title: S ( ) Delete
Name: MEDINA, GUSTAVO A
Address: AV. LIBERTADOR, ENTRE CALLE LA JOYA Y ELIC
City-St-Zip: CHACAO, CARACAS, VE 00000 VE

Title: D ( ) Delete
Name: GOMEZ, JOSE M
Address: AV. LIBERTADOR, ENTRE CALLE LA JOYA Y ELIC
City-St-Zip: CHACAO, CARACAS, VE 00000 VE

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: ANTONIO PARDO CPT 04/09/2008
Electronic Signature of Signing Officer or Director — Date