

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000505

FILED
May 01, 2008
Secretary of State

Entity Name: SPIRITS OF AFRICA INC. OF NEVADA

Current Principal Place of Business:

4603 ROSS LANIER LN
KISSIMMEE, FL 34758

New Principal Place of Business:

1318 IVY MEDOW LN
ORLANDO, FL 32824

Current Mailing Address:

4603 ROSS LANIER LN
KISSIMMEE, FL 34758

New Mailing Address:

3299 WOODBRIDGE LN.
ORLANDO, FL 32808

FEI Number: 02-0790946

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALINDEZ, RALPH D
4603 ROSS LANIER LN
KISSIMMEE, FL 34758 US

Name and Address of New Registered Agent:

GALINDEZ, RALPH D
1318 IVY MEDOW DR
ORLANDO, FL 32824 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:

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: GALINDEZ, RALPH D
Address: 4603 ROSS LANIER LN
City-St-Zip: KISSIMMEE, FL 34758

Title: PST () Delete
Name: PUSEY-GALINDEZ, RAQUEL
Address: 4603 ROSS LANIER LN
City-St-Zip: KISSIMMEE, FL 34758

Title: VP () Delete
Name: PUSEY-GALINDEZ, RAQUEL
Address: 4603 ROSS LANIER LN
City-St-Zip: KISSIMMEE, FL 34758

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: GALINDEZ, RALPH D
Address: 1318 IVY MEADOW DR.
City-St-Zip: ORLANDO, FL 32824

Title: PST (X) Change () Addition
Name: PUSEY-GALINDEZ, RAQUEL
Address: 1318 IVY MEADOW DR.
City-St-Zip: ORLANDO, FL 32824

Title: VP (X) Change () Addition
Name: PUSEY-GALINDEZ, RAQUEL
Address: 1318 IVY MEADOW DR.
City-St-Zip: ORLANDO, FL 32824

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: RALPH D. GALINDEZ

C

05/01/2008

Electronic Signature of Signing Officer or Director

Date