

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G11771

FILED
Apr 03, 2009
Secretary of State

Entity Name: C.R. INT'L ENTERPRISES, INC.

Current Principal Place of Business:

8725 NW. 18 TERRACE
SUITE 402
MIAMI, FL 33172

New Principal Place of Business:

8725 NW. 18 TERRACE
SUITE 400
MIAMI, FL 33172 US

Current Mailing Address:

8725 N.W. 18 TERR
SUITE 402
DORAK, FL 33172

New Mailing Address:

8725 NW. 18 TERRACE
SUITE 400
MIAMI, FL 33172 US

FEI Number: 59-2240957

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, WILLIAM
777 BRICKELL AVENUE
SUITE 1114
MIAMI, FL 33131 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: PD () Delete
Name: BARRIENTOS, EDUARDO
Address: 8725 NW 18 TERRACE, SUITE 402
City-St-Zip: MIAMI, FL 33172

Title: PT () Delete
Name: OLAZABAL, CRISTINA
Address: 8725 NW 18 TERRACE, SUITE 402 DORAL
City-St-Zip: MIAMI, FL 33172

Title: VPD (X) Delete
Name: ZAMORA, MARIO
Address: 8725 NW 18 TERRACE, SUITE 402
City-St-Zip: MIAMI, FL 33172

Title: TD (X) Delete
Name: MONGE, FRANCISCO
Address: 8725 NW 18 TERRACE, SUITE 402
City-St-Zip: MIAMI, FL 33172

Title: PT (X) Delete
Name: BARRIENTOS, MARIO ZAMORA
Address: 8725 NW 18 TERR, SUITE 402 DORAL
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ZAMORA, MARIO
Address: 8725 NW 18 TERRACE, SUITE 400 DORAL
City-St-Zip: MIAMI, FL 33172 US

Title: VP (X) Change () Addition
Name: OLAZABAL, CRISTINA
Address: 8725 NW 18 TERRACE, SUITE 400 DORAL
City-St-Zip: MIAMI, FL 33172 US

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: CRISTINA OLAZABAL

VP

04/03/2009

Electronic Signature of Signing Officer or Director

Date