2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K18846

Entity Name: NEW PATRIFAM, N.V., INC.

FILED Feb 10, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

801 MADRID ST 4915 SW 149TH CT. CORAL GABLES, FL 33114 LIS

UNIT F MIAMI, FL 33185

Current Mailing Address: New Mailing Address:

P O BOX 145025

CORAL GABLES, FL 33114 US

FEI Number: 65-0099723 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:

ORTIZ, ALEX DE CAPPUCCIO, YOLANDA B 354 SEVILLA AVENUE

4915 SW 149TH CT. CORAL GABLES, FL 33134 US **UNIT F** MIAMI, FL 33185 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: YOLANDA B. DE CAPPUCCIO 02/10/2010

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

DE CAPPUCCIO, YOLANDA B Name:

1607 PONCE DE LEON BLVD., APT. 11-C Address:

City-St-Zip: CORAL GABLES, FL 33134 US

Title: VPD

Name: CAPPUCCIO, LEANDRO

1607 PONCE DE LEON BLVD., APT. 11-C Address:

CORAL GABLES, FL 33134 US City-St-Zip:

Title: SD

CAPPUCCIO, CARLOS P Name: 64 BROADACRE DR. Address: City-St-Zip: MT. LAUREL, NJ 08054 US

Title:

CAPPUCCIO, RAFAEL A Name:

Address: 1607 PONCE DE LEON BLVD., APT. 11-C

City-St-Zip: CORAL GABLES, F 33134 US

I hereby 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 all other like empowered.

SIGNATURE: YOLANDA B. DE CAPPUCCIO PD 02/10/2010