2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000062050

Entity Name: DISTRIBUIDORA GIORGIO USA, LLC

FILED Apr 28, 2009 Secretary of State

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

12815 NW 45 AVE OPALOCKA, FL 33054 12815 NW 45 AVE SUITE 6A

SUITE 6A OPALOCKA, FL 33054

Current Mailing Address: New Mailing Address:

12815 NW 45 AVE OPALOCKA, FL 33054 12815 NW 45 AVE SUITE 6A

OPALOCKA, FL 33054

FEI Number: 26-0347176 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:

BENEDETTO, MAZZUCCO 1446 CANARY ISLAND DR WESTON, FL 33327 US

MANAGING MEMBERS/MANAGERS:

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

Electronic Signature of Registered Ager

ADDITIONS/CHANGES:

 Title:
 MGRM () Delete
 Title:
 MGRM (X) Change () Addition

 Name:
 BENEDETTO, MAZZUCCO
 Name:
 BENEDETTO, MAZZUCCO

 Address:
 1446 CANARY ISLAND DR
 Address:
 1446 CANARY ISLAND DR

City-St-Zip: WESTON, FL 33327 City-St-Zip: WESTON, FL 33327 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: ALEXANDRO, CENTOFANTI Name: ALEXANDRO, CENTOFANTI Address: 27320 SW 154 AVE Address: 27320 SW 154 AVE

City-St-Zip: HOMESTEAD, FL 33032 City-St-Zip: HOMESTEAD, FL 33032 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Title:
 MGRM () Delete
 Title:
 MGRM (X) Change () Addition

 Name:
 STEFANO, TAURCHINI
 Name:
 GIUSEPPE, CECINATO

Address: CALLE SEMPRUM, QUINTA LEOSAN, SANTA MONICA Address: 2216 ENESADA TERRACE
City-St-Zip: CARACAS, DF 1060 VE City-St-Zip: WESTON, FL 33327 US

Title: MGTM (X) Delete Title: () Change () Addition

 Name:
 GIUSEPPE, CECINATO
 Name:

 Address:
 AVENIDA LLANES, QUINTA LUIGI, MACARACUAY
 Address:

 City-St-Zip:
 CARACAS, DF 1060 VE
 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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BENEDETTO MAZZUCCO MGRM 04/28/2009