


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 25, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M28907</b>	
1. Entity Name <b>LATINAMERICAN PAPER MACHINERY, INC.</b>	

Principal Place of Business <b>5708 NW 72ND AVE MIAMI, FL 33166-4210 US</b>	Mailing Address <b>5708 NW 72ND AVE MIAMI, FL 33166 US</b>
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**DO NOT WRITE IN THIS SPACE**



01162008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>59-2655463</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**CORCHUELO, BERNARDO  
5708 NW 72ND AVE  
MIAMI, FL 33166-4210**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	U00000837317 03/04/08-80051-014 159.75
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CORCHUELO, BERNARDO 5708 NW 72ND AVE MIAMI, FL 331664210
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP,S CORCHUELO, ZAMIRA 5708 NW 72ND AVE MIAMI, FL 331664210
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CORCHUELO, ANDRES 5708 NW 72ND AVE MIAMI, FL 33166
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Zamira Corchuelo - Zamira Corchuelo* **2/6/08** **305-477-7101**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #