2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# M43035

Address:

City-St-Zip:

OFC 23-A FCO

CARACAS, VENEZUELA, VE

FILED Aug 22, 2008 Secretary of State

Entity Name: BENGIO CORPORATION Current Principal Place of Business: New Principal Place of Business: % BLANCA ARGUELLES 2151 SW 89TH CT. MIAMI, FL 33126 **New Mailing Address: Current Mailing Address:** % BLANCA ARGUELLES 2151 SW 89TH CT. MIAMI, FL 33165 FEI Number: 65-0068848 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: **BLANCA ARGUELLES** 2151 SW 89 CT MIAMI, FL 33165 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition GIOVANAZZI, CRISTINA, G. Name: Name: BENITEZ, MANUEL J OFC23-A AV FCO 1445 MASTERS CIR APT 159 Address: Address: City-St-Zip: CARACAS, VENEZUELA, City-St-Zip: DELRAY BEACH, FL 33445 Title: VΡ Title: () Change () Addition (X) Delete Name: BENITEZ GIOVANAZZI, ANDRES M Name: OFC 23-A FCO Address: Address: CARACAS, VENEZUELA, City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition BENITEZ GIOVANAZZI, MANUEL J Name: Name: 1445 MASTERS CIRCLE APT 159 Address: Address: City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: Title: (X) Delete Title: () Change () Addition BENITEZ GIOVANAZZI, ANDRES M Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: MANUEL BENITEZ DP 08/22/2008