2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011506

FILED Apr 21, 2008 Secretary of State

Entity Name: CAMARA INTERNACIONAL DE COMERCIO DEL MERCOSUR EN LOS ESTADOS UNIDOS, INC.

Current Principal Place of Business:		New Principal Place of Business:		
132 KAN EVEL TV //IAMI, FL		SE .		
Current N	/lailing Addres	ss:	New Maili	ng Address:
132 KAN EVEL TV //IAMI, FL		SE .		
El Number	r: 20-8776954	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()
lame and	d Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:
806 ALCA SUITE 30:	ZAR AV.	OLDINGS CORP		
	e named entity : e of Florida.	submits this statement for the	purpose of changing	ts registered office or registered agent, or bo
	e of Florida.	submits this statement for the	purpose of changing	its registered office or registered agent, or bo
n the Stat	e of Florida.	submits this statement for the		its registered office or registered agent, or bo
n the Stat SIGNATU	e of Florida.	nic Signature of Registered Ag	ent	
n the Stat SIGNATU	e of Florida. RE: Electror S AND DIREC	nic Signature of Registered Ag TORS:) Delete , XAVIER DNCOURSE	ent	Date
n the Stat BIGNATU DFFICER ittle: lame: .ddress:	E of Florida. RE: Electror S AND DIREC P CAPDEVIELLE 1132 KANE CO MIAMI, FL 331 V WOODBRIDGE	nic Signature of Registered Age TORS:) Delete , XAVIER NCOURSE 54) Delete E, FREDERICK L AVENUE, SUITE 1650	ent ADDITION Title: Name: Address:	Date IS/CHANGES TO OFFICERS AND DIRECT
n the Stat SIGNATU DFFICER itle: lame: ddress: itly-St-Zip: itle: lame: ddress:	E of Florida. RE: Electror S AND DIREC P CAPDEVIELLE 1132 KANE CO MIAMI, FL 331 V WOODBRIDGE 701 BRICKELI MIAMI, F 3315	nic Signature of Registered Age TORS:) Delete , XAVIER DICOURSE 54) Delete E, FREDERICK L AVENUE, SUITE 1650 14) Delete LIO ASIO 551/08	Title: Name: Address: City-St-Zip: Title: Name: Address:	Date IS/CHANGES TO OFFICERS AND DIRECT () Change () Addition V (X) Change () Addition LASCANO, JULIO AV. GIANNATTIASIO 551/08

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: XAVIER CAPDEVIELLE P 04/21/2008