

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000009861

FILED
Mar 30, 2011
Secretary of State

Entity Name: THE LATIN AMERICAN VINOFESE, INC

Current Principal Place of Business:

411 EAST ATLANTIC AVENUE
C/O GOL, THE TASTE OF BRAZIL REST OFFICE
DELRAY BEACH, FL 33483

New Principal Place of Business:

411 EAST ATLANTIC AVENUE
C/O GOL THE TASTE OF BRAZIL OFFICE
DELRAY BEACH, FL 33483

Current Mailing Address:

411 EAST ATLANTIC AVENUE
C/O GOL, THE TASTE OF BRAZIL REST OFFICE
DELRAY BEACH, FL 33483

New Mailing Address:

411 EAST ATLANTIC AVENUE
C/O GOL THE TASTE OF BRAZIL OFFICE
DELRAY BEACH, FL 33483

FEI Number: 27-0635611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REIDER, FRANKLIN
411 E. ATLANTIC AV
C/O GOL THE TASTE OF BRAZIL OFFICE
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

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:

Title: P
Name: REIDER, FRANK
Address: 411 EAST ATLANTIC AVENUE
City-St-Zip: DELRAY BEACH, FL 33483

Title: VP
Name: STEPLEMAN, STEVEN J
Address: CPG/KOD -SUITE 300, 1515 N FEDERAL HWY
City-St-Zip: BOCA RATON, FL 33432

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

SIGNATURE: FRANKLIN REIDER

PRES

03/30/2011

Electronic Signature of Signing Officer or Director

Date