2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007
Secretary of State

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Entity Name: MULTIFLORA CORPORATION

Current Principal Place of Business:

701 BRICKELL AVENUE
SUITE 1400
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

701 BRICKELL AVENUE
SUITE 1400
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-1015287 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAW CENTER OF THE AMERICAS, LLC
701 BRICKELL AVENUE
SUITE 1400
MIAMI, FL 33131 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: GUTIERREZ, GREGORIO
Address: 701 BRICKELL AVENUE, STE. 1400
City-St-Zip: MIAMI, FL 33131

Title: DVP ( ) Delete
Name: MCALLISTER, ALVARO
Address: 701 BRICKELL AVENUE, STE. 1400
City-St-Zip: MIAMI, FL 33131

Title: DT ( ) Delete
Name: MORENO, GUSTAVO
Address: 701 BRICKELL AVENUE, STE. 1400
City-St-Zip: MIAMI, FL 33131

Title: S ( ) Delete
Name: HAGEN, STEVEN H
Address: 701 BRICKELL AVENUE, STE. 1400
City-St-Zip: MIAMI, FL 33131

Title: D (X) Delete
Name: MCALLISTER, CARLOS
Address: 701 BRICKELL AVENUE, STE. 1400
City-St-Zip: MIAMI, FL 33131

Title: D (X) Delete
Name: MCALLISTER, JUANITA
Address: 701 BRICKELL AVENUE, STE. 1400
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: MCALLISTER, ALVARO
Address: 701 BRICKELL AVENUE, STE. 1400
City-St-Zip: MIAMI, FL 33131

Title: DV (X) Change ( ) Addition
Name: MCALLISTER, CARLOS
Address: 701 BRICKELL AVENUE, STE. 1400
City-St-Zip: MIAMI, FL 33131

Title: DT (X) Change ( ) Addition
Name: MCALLISTER, JUANITA
Address: 701 BRICKELL AVENUE, STE. 1400
City-St-Zip: MIAMI, FL 33131

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: STEVEN H. HAGEN S 04/09/2007

Electronic Signature of Signing Officer or Director — Date