## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000047529

Entity Name: CARNICERIA ARGENTINA LA ESTANCIA INC.

FILED Apr 29, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

10375 N.W. 41 ST. 10375 N.W. 41 ST. DORAL, FL 33178

Current Mailing Address: New Mailing Address:

10375 N.W. 41 ST. 10375 N.W. 41 ST. DORAL, FL 33178

FEI Number: 65-1015123 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:

AMOROSI, ANDRES

10375 N.W. 41 STREET

MIAMI, FL 33178 US

ENTERPRISE RESOURCE PLANNING, INC
10305 NW 41 STREET # 219
DORAL, FL 33178 US

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: ERP 04/29/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

PVST ( ) Delete Title: PVST (X) Change ( ) Addition

 Name:
 AMOROSI, ANDRES
 Name:
 AMOROSI, ANDRES

 Address:
 6701 NW 111 AVE.
 Address:
 6701 NW 111 AVE.

 City-St-Zip:
 MIAMI, FL 33178
 City-St-Zip:
 DORAL, FL 33178

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: AMOROSI, ANDRES Name: AMOROSI, ANDRES

 Name:
 AMOROSI, ANDRES
 Name:
 AMOROSI, ANDRES

 Address:
 6701 NW 111 AVE.
 Address:
 6701 NW 111 AVE.

 City-St-Zip:
 MIAMI, FL 33178
 City-St-Zip:
 DORAL, FL 33178

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 AMOROSI, MARIA
 Name:
 AMOROSI, MARIA

 Address:
 6701 NW 111 AVE.
 Address:
 6701 NW 111 AVE.

 City-St-Zip:
 MIAMI, FL 33178
 City-St-Zip:
 DORAL, FL 33178

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.

SIGNATURE: MARIA AMOROSI VP 04/29/2009