2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000062921

Entity Name: PRADO'S CO.

FILED Jun 26, 2008 Secretary of State

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

7143 SOMERSWORTH DR 4413 S KIRKMAN RD

ORLANDO, FL 32835 # 209

ORLANDO, FL 32811 US

Current Mailing Address: New Mailing Address:

5956 BENT PINE DR 4413 S KIRKMAN RD

160 # 209

ORLANDO, FL 32822 US ORLANDO, FL 32811 US

FEI Number: 59-3735085 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:

PRADO, PATRICIA Z DOS SANTOS, GEREMIAS A 7143 SOMERSWORTH DR 4413 S KIRKMAN RD

ORLANDO, FL 32835 # 209

ORLANDO, FL 32811 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: GEREMIAS A DOS SANTOS 06/26/2008

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title: PRADO, NILSON S DOS SANTOS, GEREMIAS A Name: Name: 7143 SOMERSWORTH DR 4413 S KIRKMAN RD # 209 Address: Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32811

Title: VΡ (X) Change () Addition Title: () Delete Name: PRADO, PATRICIA Z Name: PRADO, NILSON S

7143 SOMERSWORTH DR 4413 S KIRKMAN RD # 209 Address: Address: ORLANDO, FL 32835 ORLANDO, FL 32811 City-St-Zip: City-St-Zip:

() Delete Title: (X) Change () Addition Title: TRINDADE, JORGE BAUTISTA CAVACCINI, CLAUDEMIR Name: Name:

7143 SOMERSWORTH DR 4413 S KIRKMAN RD # 209 Address: Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32811

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

LOPEZ TINOCO, CASSIMIRO FERREIRA, MARCOS S Name: Name: Address: 7143 SOMERSWORTH DR Address: 4413 S KIRKMAN RD # 209 City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32811

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: GEREMIAS ALVES DOS SANTOS PD 06/26/2008