2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000004416

Entity Name: LA NUEVA ARGENTINA, INC.

FILED Jan 29, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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10121 S.W. 72ND ST. MIAMI, FL 33173

Current Mailing Address: New Mailing Address:

10121 S.W. 72ND ST. MIAMI, FL 33173

FEI Number: 30-0027927 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:

BADER, JOSE BADER, JOSE 8704 SW 141 ST, APT. L'3' 11120 SW 70 TERRACE MIAMI, FL 33176 US MIAMI, FL 33173 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: 01/29/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: SAAVEDRA, SUSANA Name: RUIZ, MARCIA C

 Name:
 SAAVEDRA, SUSANA
 Name:
 RUIZ, MARCIA C

 Address:
 11120 SW 70 TERRACE
 Address:
 11120 SW 70 TERRACE

 City-St-Zip:
 MIAMI, FL 33173
 City-St-Zip:
 MIAMI, FL 33173

Title: VPSD () Delete Title: () Change () Addition

 Name:
 BADER, JOSE
 Name:

 Address:
 11120 SW 70 TERRACE
 Address:

 City-St-Zip:
 MIAMI, FL 33173
 City-St-Zip:

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

 Name:
 NIEVES, CARLA
 Name:
 SAAVEDRA, SUSANA

 Address:
 14071 SW 40TH TERRACE
 Address:
 11120 SW 70 TERRACE

 City-St-Zip:
 MIAMI, FL 33175
 City-St-Zip:
 MIAMI, FL 33173

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

 Name:
 SOTO, MARCIA C
 Name:
 NIEVES, CARLA C

 Address:
 8415 SW 107 AVE. APT 359W
 Address:
 11120 SW 70 TERRACE

 City-St-Zip:
 MIAMI, FL 33173
 City-St-Zip:
 MIAMI, FL 33173

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: BADER JOSE VPSD 01/29/2008