2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000060262

1. Entity Name

IMPORTADORA GLOBAL P.P. CORP



FILED Jan 24, 2008 08:00 A Secretary of State

Principal Place of Business

16075 SW 150 STREET

MIAMI, FL 33196

Mailing Address

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

16075 SW 150 STREET MIAMI, FL 33196



DO NOT WRITE IN THIS SPACE

01222008 No Chg-P CR2E034 (11/05)

4. FEI Number
75-3062688

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

POLANCO, LUIS R 16075 SW 150 STREET MIAMI, FL 33196

SIGNATURE:

DO NOT WRITE IN THIS SPACE

1-ZZ-08

305-609-2929

Daytime Phone #

| | | | | | · |
|---|---|---|-------------------------------|---------------------------------------|---------------------------|
| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | | | |
| SIGNATURE | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | | Election Campaign Financin Trust Fund Contribution. | · _ | \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | | _ | , , , , , , , , , , , , , , , , , , , | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PSTD POLANCO, LUIS R 16075 SW 150 STREET MIAMI, FL 33196 | | | U00000793423 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | 01/25/08-80008-012 150.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | DO NOT WRITE IN THIS SPACE | | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | | | |