

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000040001

Entity Name: TODOSA, CORP.

FILED  
May 15, 2009  
Secretary of State

## Current Principal Place of Business:

5590 NW 84 AVE  
MIAMI, FL 33166

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 826851  
SOUTH FLORIDA, FL 33082 US

## New Mailing Address:

FEI Number: 20-0028265

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

E & V GREAT PROFESSIONAL INC  
6216 SW 8 ST  
MIAMI, FL 33144 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

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:

Title: P ( ) Delete  
Name: RAMIREZ, ADELA  
Address: 5590 NW 84 AVE  
City-St-Zip: MIAMI, FL 33166

Title: VP ( ) Delete  
Name: TOVAR, HORACIO  
Address: 5590 NW 84 AVE  
City-St-Zip: MIAMI, FL 33166

Title: VP ( ) Delete  
Name: VELASQUEZ, YADITZY  
Address: 5102 BEMERE PKWY  
City-St-Zip: TAMPA, FL 33624

Title: D ( ) Delete  
Name: TOVAR, ANTONIO  
Address: 5590 NW 84 AVE  
City-St-Zip: MIAMI, FL 33166

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition  
Name: CEGARRA, YANIRET  
Address: 5590 NW 84 AVE  
City-St-Zip: MIAMI, FL 33166

Title: D (X) Change ( ) Addition  
Name: TOVAR, ANTONIO  
Address: 5590 NW 84 AVE  
City-St-Zip: MIAMI, FL 33166

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: ANTONIO TOVAR

D

05/15/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date