

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000121500	
1. Entity Name SUPERMERCADO EL DIAMANTE, CORP	

Principal Place of Business 800 CLAUHTON ISLAND DR APT 2501 MIAMI, FL 33131	Mailing Address 800 CLAUHTON ISLAND DR APT 2501 MIAMI, FL 33131
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01172008 No Chg-P- CR2E034 (11/05)

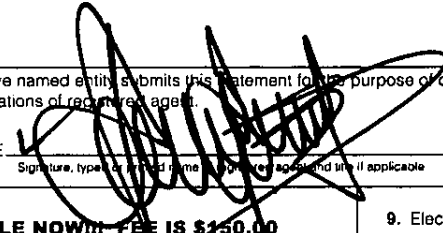
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4. FEI Number 86-1085097	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent PREVITE, PIETRO 800 CLAUHTON ISLAND DR APT 2501 MIAMI, FL 33131

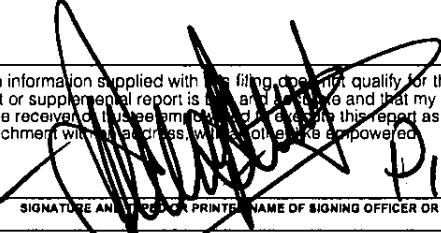
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	DATE 1/17/08
Signature, type, or printed name of officer, agent, and title if applicable (NOTE: Registered Agent signature required when reinstating)	

FILE NOW!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U00000797356 01/29/08-80071-001 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PREVITE, PIETRO 800 CLAUHTON ISLAND DR APT 2501 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DUARTE, RAFAEL 800 CLAUHTON ISLAND DR APT 2501 MIAMI, FL 33131
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 correct 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 of the same and that I have read and understand the contents of this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with my address, will, or other facts empowered.	
SIGNATURE: 	DATE 1/17/08 DAYTIME PHONE # 786-4251255
SIGNATURE AND ADDRESS OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	