2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 04, 2005 8:00 am Secretary of State 04-04-2005 90086 019 ***158.75

1. Entity Name PANDEBONO'S VALLUNO U.S.A. INC.						04-04-2003	90080	019 1.	96.73
Principal Place	Mailing Address	Address							
328 CRANDON BLVD LOCAL 115 KEY BISCAYNE, FL 33149		6272 NW 170 TERRACE MIAMI, FL 33015					5	00332	232
2. Principal P 6272	lace of Business N W 170 Tcanace	3. Mailing Address							
Suite, Apt.	Suite, Apt. #, etc.	Apt. #, etc.			Chg-P	CR2E0	34 (10/03)		
City & State City & State					4. FEI Number 16-16883	306		<u> </u>	plied For t Applicable
^{Zip} 330	Country ULTA	Zip	Country		5. Certificate of	Status Desired		\$8.75 Add Fee Require	
	6. Name and Address of Current Ro	egistered Agent			7. Name and A	ddress of New R	egistered /	Agent	
CALVO, DANIEL I				Name					
2060 NE 62 ST FT LAUDERDALE, FL 33308				Street Address	(P.O. Box Number	is Not Acceptable)		
			-	City				Zip Codi	<u> </u>
The above named entity submits this statement for the purpose of changing its regis				•	red agent or both	in the State of Flo	FL	• '	
the obligat	cions of registered agent	læ				<u> </u>	5/1	7/00	
	Signature, typed or printed name of registered agent and	d title it applicable. (NOT)	E: Registered Aç	gent signature require	d when reinstating)	í- 	DATE	***) () () () () () () () () () (
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campa Trust Fund Cont	-		.00 May Be ded to Fees			- •	
10.	OFFICERS AND D		11.		ADDITIONS/CI	HANGES TO OFF	CERS AND		3 IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VALLUNO, PANDEBONO'S CALLE 6 7 N 61A-20 BOGOTA, COLOMBIA,	□ Delete	TITLE NAME STREET A	I .				Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CALVO, JOSE P 6272 NW 170 TERRACE MIAMI, FL 33015	☐ Delete	TITLE NAME STREET A					Change	☐ Addition
TITLE NAME	V FRANCEL, JANETH	☐ Delete	TITLE NAME					☐ Change	Addition
STREET ADDRESS* CITY-ST-ZIP	6272 NW 170 TERRACE MIAMI, FL 33015		STREET A	I					•
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CALVOEL, DANIEL I 328 CRANDON BLVD LOCAL 115 KEY BISCAYNE, FL 33149	☐ Delete	TITLE NAME STREET A CITY-ST	1				☐ Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET A CITY-ST	Address - Zip		1- 10-	***	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Deletę	THTLE NAME STREET A CITY-ST	I				☐ Change	Addition
12. I hereby indicated	certify that the information supplied with t f on this report or supplemental report is t	his filing does not qualify fo rue and accurate and that i	or the exemp	otion stated in S e shall have the	ection 119.07(3)(i), same legal effects	Florida Statutes.	further cer	tify that the in	nformation or director

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 his 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 an address, with all other like propowered.

AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR