2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000031587 07 FEB 27 PM 3: 19 1. Entity Name CALVO NORTH AMERICA INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 10350 W BAY HARBOUR DR 10350 W BAY HARBOUR DR 600089600926 BAL HARBOR, FL 33154 BAL HARBOR, FL 33154 2. Principal Place of Business - No P.O. Box # GRUPO CALVO Address Hill Betts&Nash Atta: James D. Kleiner 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01092007 CR2E034 (12/06) Chg-P Pechuan 1 - 1º 200 Liberty Street, 26th F City & State City & State 4. FEI Number Applied For Madrid New York, NY 90-0152324 Not Applicable Ζip Country Country \$8.75 Additional 5. Certificate of Status Desired 28002 SPAIN 10281 NY Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 City Zip Code 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_ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Bo FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Dir/Pres. Delete TILE. NAME MANUEL, TABARES F VP NAME Manuel Calvo Pumpido STREET ADDRESS **84 MOUNTAIN ROAD** STREET ADDRESS Peshuan 1 - 10 - Spain CITY-ST-ZIE RIDGEFIELD, CT 06877 CITY-ST-ZIP Dir/Chairman TILE Detete TITLE NAME Manuel Calvo GarciaaBenavides NAME STREET ADDRESS STREET ADDRESS Pechhan F - 19 CITY-ST-71P CITY-ST-ZIP 28002 - Madrid - Spain TITLE □ Delete MLE Dir/ V.P. NAME MAME Miguel Angel Penalva Arigita STREET ADDRESS STREET ADDRESS Peshuan 1 - 10 28002 - Madrid -Spain CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete ШE Addition Dir / Treasurer David Llanas Carvajal NAME NAME STREET ADDRESS Pechuan 1 -1º STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 28002 Madrid - Spain TITLE Dir / Secretary ☐ Delete TTDE ☐ Addition NAME NAME Jesus Casas Robla STREET ADDRESS STREET ADDRESS

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 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 empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

DAVID LLANAS CARVAJAL SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Delete

FEBRUAY 14, 2007 + 34-917823300

Daytime Phone #

☐ Change

☐ Addition



ACCOUNT	NO.	:	072100000032	

REFERENCE: 774049 7287980

AUTHORIZATION :

COST LIMIT

ORDER DATE: February 23, 2007

ORDER TIME : 10:23 AM

ORDER NO. : 774049-005

CUSTOMER NO: 7287980

ANNUAL REPORT FILING

NAME: CALVO NORTH AMERICA INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY __ PLAIN STAMPED COPY

___ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Doreen Wallace-EXT#2928

EXAMINER'S INITIALS: