

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000044969

Entity Name: CHILEAN TRADE, INC.

FILED  
Feb 25, 2008  
Secretary of State

## Current Principal Place of Business:

6345 COLLINS AVENUE  
SUITE 416  
MIAMI BEACH, FL 33141 US

## Current Mailing Address:

7337 HARDING AVE  
#4  
MIAMI BEACH, FL 33141 US

FEI Number: 20-1051220

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OLFOS, NERI M  
6345 COLLINS AVENUE  
SUITE 416  
MIAMI BEACH, FL 33141 US

## New Principal Place of Business:

5220 NE 2ND COURT  
SUITE 4  
MIAMI, FL 33137 US

## New Mailing Address:

5220 NE 2ND COURT  
SUITE 4  
MIAMI, FL 33137 US

## Name and Address of New Registered Agent:

OLFOS, NERI M  
5220 NE 2ND COURT  
SUITE 4  
MIAMI, FL 33137 US

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: NERI OLFOS

02/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: OLFOS, NERI M  
Address: 7337 HARDING AVE #4  
City-St-Zip: MIAMI BEACH, FL 33141

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: OLFOS, NERI M  
Address: 5220 NE 2ND COURT SUITE 4  
City-St-Zip: MIAMI, FL 33137

Title: D ( ) Change (X) Addition  
Name: BOTTO, KATHERINE  
Address: 5220 NE 2ND COURT SUITE 4  
City-St-Zip: MIAMI, FL 33137

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: NERI OLFOS

P

02/25/2008

Electronic Signature of Signing Officer or Director

Date