2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000077764

Entity Name: KING MILK, INC.

FILED Jul 30, 2009 Secretary of State

782 NW 42ND AVE 5280 NW 109 AVE APT # 1 MIAMI, FL 33126 MIAMI, FL 33178

Current Mailing Address: New Mailing Address:

C/O THE SOLANO GROUP PA 5280 NW 109 AVE APT #1 782 NW LEJEUNE RD SUITE 328 MIAMI, FL 33178

MIAMI, FL 33126

FEI Number: 20-1132469 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

THE SOLANO GROUP, P.A NAVA FELIPE, MAITTE J 782 NW LEJEUNE RD SUITE 328 5280 NW 109 AVE MIAMI, FL 33126 MIAMI, FL 33178 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: MAITTE J. NAVA FELIPE 07/30/2009

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST () Delete Title: (X) Change () Addition FELIPE DE NAVA, MARIA Name: NAVA, DANIEL Name: 782 NW 42ND AVE 5280 NW 109 AVE APT # 1 Address: Address:

City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33178

Title: Title: DST () Change (X) Addition () Delete Name: Name: NAVA FELIPE, MAITTE J Address: 5280 NW 109 AVE APT # 1 Address:

MIAMI, FL 33178 City-St-Zip: City-St-Zip:

Title: Title: () Delete () Change (X) Addition

NAVA, DANIEL Name: Name:

5280 NW 109 AVE APT # 1 Address Address:

City-St-Zip: City-St-Zip: MIAMI, FL 33178

Title: () Delete Title: () Change (X) Addition NAVA FELIPE, OSWALDO A Name: Name: Address: Address: 5280 NW 109 AVE APT # 1

City-St-Zip: City-St-Zip: MIAMI, FL 33178

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: MAITTE J. NAVA FELIPE 07/30/2009 D