2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 01, 2006
Secretary of State

DOCUMENT# P04000111648

Entity Name: LATAM DISTRIBUTORS INC

Current Principal Place of Business:

5309 WEST BROWARD BLVD
104
PLANTATION, FL 33317

New Principal Place of Business:

20052 BLUFF OAK BLVD
TAMPA, FL 33647

Current Mailing Address:

5309 WEST BROWARD BLVD
104
PLANTATION, FL 33317

New Mailing Address:

20052 BLUFF OAK BLVD
TAMPA, FL 33647

FEI Number: 20-2991348 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

VALERE, EMILE A L
5309 WEST BROWARD BLVD
104
PLANTATION, FL 33317 US

Name and Address of New Registered Agent:

VALERE, EMILE A L
20052 BLUFF OAK BLVD
TAMPA, FL 33647 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: 09/01/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: VALERE, EMILE A L
Address: 5309 WEST BROWARD BLVD
City-St-Zip: PLANTATION, FL 33317

Title: V ( ) Delete
Name: VALERE, MARCUS H
Address: 5309 WEST BROWARD BLVD
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: VALERE, EMILE A L
Address: 20052 BLUFF OAK BLVD
City-St-Zip: TAMPA, FL 33647

Title: V (X) Change ( ) Addition
Name: VALERE, MARCUS H
Address: 9017 CORMORANT CTR
City-St-Zip: TAMPA, FL 33647

I hereby certify that the information supplied with this filing does not qualify for the 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: EMILE A. L. VALERE P 09/01/2006
Electronic Signature of Signing Officer or Director — Date