2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 16, 2008
Secretary of State

DOCUMENT# P04000136961

Entity Name: SUM COMIDAS DEL PAIS, CORP

Current Principal Place of Business:

10301 N.W. 9 ST CIRCLE
UNIT 203
MIAMI, FL 33172 US

New Principal Place of Business:

Current Mailing Address:

10301 N.W. 9 ST CIRCLE
UNIT 203
MIAMI, FL 33172 US

New Mailing Address:

FEI Number: 20-2475395 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRUNO, ELEEN A
10301 N.W. 9 ST CIRCLE
UNIT 203
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

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: _____

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:

Title: PD ( ) Delete
Name: BRUNO, ELEEN
Address: 10301 N.W. 9 ST CIRCLE
City-St-Zip: MIAMI, FL 33172 US

Title: OD ( ) Delete
Name: SUM COMIDAS DEL PAIS, CORP
Address: AV. 27 DE FEBRERO #302
City-St-Zip: SANTO DOMINGO, DOM REP, FL 33172

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP ( ) Change (X) Addition
Name: NUNEZ, URRACA ANA
Address: 10301 NW 9 STREET CIR #203
City-St-Zip: MIAMI, FL 33172 US

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: ELEEN BRUNO PD 09/16/2008

Electronic Signature of Signing Officer or Director Date