## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04013

Title:

Name:

Address:

City-St-Zip:

DVT

SAN JOSE, CO

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AZUCARERA EL PALMAR, APTDO. 1518-1000

MIRANDA, JÖRGE RODOL, FO

FILED Apr 07, 2009 Secretary of State

Entity Name: ALMYRA COMPANY N.V., INC.						
Current Principal Place of Business:				New Principal Place of Business:		
355 ALHAMBRA CIRCLE, SUITE 801 MIAMI, FL 33134 US				355 ALHAMBRA CIRCLE SUITE 801 MIAMI, FL 33134 US		
Current Mailing Address:				New Mailing Address:		
355 ALHAMBRA CIRCLE, SUITE 801 MIAMI, FL 33134 US						
FEI Number:	59-2471378	FEI Number Applied For ( )	FEI Num	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
REGISTERED AGENT CORPORATE SERVICES, IC. 355 ALHAMBRA CIRCLE, SUITE 801 CORAL GABLES, FL 33134 US				REGISTERED AGENT CORPORATE SERVICES, IC. 355 ALHAMBRA CIRCLE SUITE 801 CORAL GABLES, FL 33134 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: BETSY PARENTI, ASSIST. SECRETARY				04/07/2009		
Electronic Signature of Registered Agent					Date	
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DE ARMAS, OS	11211 PROSPERITY FARMS RD,102	!	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MIRANDA, MARI	Delete O JOAQUIN PALMAR, APARTADO 1518-1000		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MIRANDA, CARL	Delete OS E. PALMAR, APTDO. 1518-1000		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JORGE MIRANDA D 04/07/2009

() Change () Addition