## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000066206

City-St-Zip:

CORAL GABLES, FL 33134

FILED Apr 28, 2008 Secretary of State

Entity Nan	ne: SPAIN'S	BEST BEERS, INC.			
Current Principal Place of Business:			New Principal P	New Principal Place of Business:	
PENTHOU	UNE ROAD SE 1G ABLES, FL 33	1134			
Current Mailing Address:			New Mailing Ad	New Mailing Address:	
PENTHOU	UNE ROAD SE 1G ABLES, FL 33	1134	2525 PONCE DE SUITE 1225 CORAL GABLES		
FEI Number:	20-3297534	FEI Number Applied For ( )	FEI Number Not Applicable (	) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Addr	Name and Address of New Registered Agent:	
11380 PRC		NS NETWORK INC. RMS ROAD #221E IS, FL 33410 US	2525 PONCE DE SUITE 1225	INTERAMERICAN CORPORATE SERVICES LLC 2525 PONCE DE LEON BLVD. SUITE 1225 CORAL GABLES, FL 33134 US	
The above in the State		submits this statement for the pu	rpose of changing its regi	stered office or registered agent, or both,	
SIGNATUR	E: PATRICI	A HERNANDEZ		04/28/2008	
	Electro	nic Signature of Registered Agen	t	Date	
Election Carr	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SOUZA, FERN	E ROAD, PENTHOUSE 1G	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	NAVARRO, MA	ROAD,PENTHOUSE 1G	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address:	TABARES, MA	i) Delete NUEL E ROAD, PENTHOUSE 1G	Title: Name: Address:	() 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.

City-St-Zip:

SIGNATURE: FERNANDO SOUZA **DPST** 04/28/2008