

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000078928

Entity Name: LOPES ALUMINUM CORP.

FILED
Jun 17, 2009
Secretary of State

Current Principal Place of Business:

8433 NARCOOSSEE RD SUITE 10104
SUITE 10104
ORLANDO, FL 32827

New Principal Place of Business:

1831 VALLEY FORGE DR
ST. CLOUD, FL 34769

Current Mailing Address:

8433 NARCOOSSEE RD
SUITE 10104
ORLANDO, FL 32827

New Mailing Address:

1831 VALLEY FORGE DR
ST. CLOUD, FL 34769

FEI Number: 20-2929663

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPES, PAULO A
8433 NARCOOSSEE RD
SUITE 10104
ORLANDO, FL 32827 US

Name and Address of New Registered Agent:

LOPES, PAULO A
1831 VALLEY FORGE DR
ST. CLOUD, FL 34769 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: PAULO LOPES

06/17/2009

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:

Title: P () Delete
Name: LOPES, PAULO A
Address: 8433 NARCOOSSEE RD SUITE 10104
City-St-Zip: ORLANDO, FL 32827

Title: S (X) Delete
Name: VITORINO, MARCELO
Address: 8433 NARCOOSSEE RD SUITE 10104
City-St-Zip: ORLANDO, FL 32827

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOPES, PAULO A
Address: 1831 VALLEY FORGE DR
City-St-Zip: ST. CLOUD, FL 34769

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

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: PAULO LOPES

P

06/17/2009

Electronic Signature of Signing Officer or Director

Date