2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000150923

Entity Name: ROFOMAR, INC.

FILED Nov 12, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O HAYDEE A. CEBALLOS, CPA 354 SEVILLA AVENUE CORAL GABLES, FL 33134

New Mailing Address: Current Mailing Address:

C/O HAYDEE A. CEBALLOS, CPA 354 SEVILLA AVENUE CORAL GABLES, FL 33134

FEI Number: 20-3786918 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KOSS, A ESQ KOSS, ABE ESQ. 782 N.W. 42ND AVENUE 782 N.W. 42ND AVENUE SUITE 448 SUITE 448 MIAMI, FL 33126 US MIAMI, FL 33126 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: ABE KOSS, ESQ. 11/12/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVSD () Delete Title: (X) Change () Addition CEBALLOS, HAYDEE A CEBALLOS, HAYDEE A Name: Name: 354 SEVILLA AVENUE 354 SEVILLA AVENUE Address: Address: City-St-Zip:

CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

Title: Title: (X) Change () Addition () Delete MARQUEZIN, LUIZ A Name: Name: CAMPOS, FRANKLIN A C/O 354 SEVILLA AVENUE C/O 354 SEVILLA AVENUE Address: Address: CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 City-St-Zip: City-St-Zip:

Title: Title: () Delete VP&D () Change (X) Addition

MARQUEZIN, ROSE M Name: Name: C/O 354 SEVILLA AVENUE Address Address: City-St-Zip: City-St-Zip: C ORAL GABLES, FL 33134

Title: () Delete Title: VP&D () Change (X) Addition

MARQUEZIN, LUIZ A Name: Name: C/O 354 SEVILLA AVENUE Address: Address: City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134

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: FRANKLIN AUGUSTO DE MOURA CAMPOS **PRES** 11/12/2007