2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000157307

Entity Name: RIO DE LA PLATA CORP.

FILED Apr 30, 2009 Secretary of State

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

6612 EVERGREEN DR 1233 MARSEILLE DR

MIRAMAR, FL 33023 US #3

MIAMI BEACH, FL 33141 US

Current Mailing Address: New Mailing Address:

6612 EVERGREEN DR 1233 MARSEILLE DR MIRAMAR, FL 33023

MIAMI BEACH, FL 33141 US

FEI Number: 20-3876250 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TOMAS, OSCAR R TOMAS, OSCAR R 6612 EVERGREEN DR 1233 MARSEILLE DR

MIRAMAR, FL 33023 US #3 MIAMI BEACH, FL 33141 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: 04/30/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

US

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRFS () Delete Title: PRFS (X) Change () Addition TOMAS, OSCAR R Name: Name: TOMAS, OSCAR R 6612 EVERGREEN DR 1233 MARSEILLE DR Address: Address: City-St-Zip:

MIAMI BEACH, FL 33141 US MIRAMAR, FL 33023 US City-St-Zip:

VΡ () Delete Title: VΡ (X) Change () Addition Title:

Name: TOMAS, SANDRA B Name: TOMAS, SANDRA B 6612 EVERGREEN DR 1233 MARSEILLE DR Address: Address: MIRAMAR, FL 33023 US MIAMI BEACH, FL 33141 US City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition TRFA () Delete TRFA

TOMAS, ESTEBAN O TOMAS, ESTEBAN O Name: Name: 6612 EVERGREEN DR 1233 MARSEILLE DR Address: Address: City-St-Zip: MIRAMAR, FL 33023 US City-St-Zip: MIAMI BEACH, FL 33141 US

Title: () Delete Title: SECR () Change (X) Addition

TOMAS, LETICIA C Name: Name: Address: Address: 1233 MARSEILLE DR City-St-Zip: City-St-Zip: MIAMI BEACH, FL 33141 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.

VΡ SIGNATURE: SANDRA TOMAS 04/30/2009