2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000087253

Entity Name: SABOR A VINO INC.

FILED Apr 27, 2007 Secretary of State

| | rincipal Place o | of Business: | New Principal Place | New Principal Place of Business: | |
|-----------------------------------------------|----------------------------------------------------------------|-------------------------------------------------------------------------|------------------------------------|----------------------------------------------|--|
| 2340 NW 2 SUITE #2 | 27TH AVENUE | | | | |
| MIAMI, FL | 33142 US | | | | |
| Current Mailing Address: | | | New Mailing Address | New Mailing Address: | |
| 2340 NW 2 SUITE #2 | 27TH AVENUE | | | | |
| MIAMI, FL | 33142 US | | | | |
| FEI Number: | | FEI Number Applied For () | FEI Number Not Applicable (X) | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| SUITE #2 MIAMI, FL | 27TH AVENUE 33142 US | lamits this statement for the n | | | |
| rne above | | | urnaca of changing ita ragistaras | l affice ar registered agent or both | |
| n the State | of Florida. | brills this statement for the p | ourpose of changing its registered | d office or registered agent, or both, | |
| in the State SIGNATUF | of Florida. | idinits this statement for the p | ourpose of changing its registered | d office or registered agent, or both, | |
| | e of Florida. RE: | Signature of Registered Age | | d office or registered agent, or both, Date | |
| SIGNATUF | e of Florida. RE: Electronic | · | | | |
| SIGNATUF | e of Florida. RE: Electronic | Signature of Registered Age | ent | | |
| SIGNATUF | e of Florida. RE: Electronic npaign Financing S AND DIRECTO | Signature of Registered Age Frust Fund Contribution (). ORS: Delete | ent ADDITIONS/CHANGE | Date | |

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: JOSE L CHI P 04/27/2007