

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000093528

Entity Name: DISTRIBUCIONES KAMY, INC.

FILED
Apr 18, 2008
Secretary of State

Current Principal Place of Business:

8600 SW 109 AVENUE
BLDG 4 APT 223
MIAMI, FL 33173

New Principal Place of Business:

4805 N.W. 79TH AVENUE
SUITE 4
DORAL, FL 33166

Current Mailing Address:

8600 SW 109 AVENUE
BLDG 4 APT 223
MIAMI, FL 33173

New Mailing Address:

4805 N.W. 79TH AVENUE
SUITE 4
DORAL, FL 33166

FEI Number: 13-4338191

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALENCIA, NORMA M
8600 SW 109 AVENUE
BLDG 4 APT 223
MIAMI, FL 33173 US

Name and Address of New Registered Agent:

VALENCIA, NORMA M
4805 N.W. 79TH AVENUE
SUITE 4
DORAL, FL 33166 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: NORMA M. VALENCIA

04/18/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VALENCIA, NORMA M
Address: 8600 SW 109 AVENUE, BLDG 4 APT 223
City-St-Zip: MIAMI, FL 33173

Title: VP () Delete
Name: CALERO, MARIA C
Address: 8600 SW 109 AVENUE, BLDG 4 APT 223
City-St-Zip: MIAMI, FL 33173

Title: T (X) Delete
Name: VALENCIA, CARLOS A
Address: 8600 SW 109 AVENUE, BLDG 4 APT 223
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: VALENCIA, NORMA M
Address: 4805 N.W. 79TH AVENUE SUITE 4
City-St-Zip: DORAL, FL 33166

Title: VP (X) Change () Addition
Name: VALENCIA, CARLOS A
Address: 4805 N.W. 79TH AVENUE SUITE 4
City-St-Zip: DORAL, FL 33166

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: NORMA M. VALENCIA

PRES

04/18/2008

Electronic Signature of Signing Officer or Director

Date