



FILED
Jun 13, 2008 8:00 am
Secretary of State

05-19-2008 90040 049 ***150.00

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT.**

DOCUMENT # P06000103594		
1. Entity Name LOS BARDOS DE AMERICA, INC.		
Principal Place of Business 10985 SW 107TH ST 213 MIAMI, FL 33176		Mailing Address PO BOX 260112 MIAMI, FL 33126
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent JIMENEZ, MARIA A 10985 SW 107TH ST 213 MIAMI, FL 33176		66014176  04172008 No Chg-P CR2E034 (11/05) 4. FEI Number 06-1788574 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Maria A Jimenez</u> DATE <u>04-24-08</u> <small>Signature, typed or printed name of registered agent and last 1 applicable (NOTE: Registered Agent signature required when reappointing)</small>		DO NOT WRITE IN THIS SPACE
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS JIMENEZ, MARIA A 10985 SW 107TH ST NO 213 MIAMI, FL 33176	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Maria A Jimenez</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>06-10-08</u> <u>786-3332933</u> <small>Date Daytime Phone</small>