2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000114999

Entity Name: BRIZA AR. DE INC

FILED May 08, 2009 Secretary of State

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

118 WAKULLA SPRING WAY ROYAL PALM BEACH, FL 33411 US

Current Mailing Address: New Mailing Address:

118 WAKULLA SPRING WAY ROYAL PALM BEACH, FL 33411 US

FEI Number: 20-5494524 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:

DOMINGUEZ, DENISE J

118 WAKULLA SPRING WAY

ROYAL PALM BEACH, FL 33411 US

DOMINGUEZ, DENISE J

118 WAKULLA SPRINGS WAY

ROYAL PALM BEACH, FL 33411 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: DENISE DOMINGUEZ 05/08/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition DOMINGUEZ, DENISE J DOMINGUEZ, DENISE J Name: Name: 118 WAKULLA SPRING WAY 118 WAKULLA SPRINGS WAY Address: Address: City-St-Zip: ROYAL PALM BEACH, FL 33411 US City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: VP,D () Delete Title: () Change () Addition

 Name:
 CONTRERAS, ARIEL E
 Name:

 Address:
 118 WAKULLA SPRING WAY
 Address:

 City-St-Zip:
 ROYAL PALM BEACH, FL 33411 US
 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: DENISE DOMINGUEZ PD 05/08/2009