

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P07000116546

**FILED**  
**Oct 24, 2008**  
**Secretary of State****Entity Name:** DESSERTS AND MORE DISTRIBUTORS INC.**Current Principal Place of Business:**1375 N.W. 97 AVENUE  
# 12  
DORAL, FL 33172 US**New Principal Place of Business:**1375 N.W. 97 AVENUE  
# 14  
DORAL, FL 33172 US**Current Mailing Address:**1375 N.W. 97 AVENUE  
# 12  
DORAL, FL 33172 US**New Mailing Address:**1375 N.W. 97 AVENUE  
# 14  
DORAL, FL 33172 US**FEI Number:****FEI Number Applied For (X)****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BUSSIERE, LIDIAO  
1375 N.W. 97 AVENUE  
# 12  
DORAL, FL 33172 US**Name and Address of New Registered Agent:**VASQUEZ, YRANA A  
1375 N.W. 97 AVENUE  
# 14  
DORAL, FL 33172 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: YRANA A VASQUEZ

10/24/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BUSSIERE, LIDIA  
Address: 1375 N.W. 97 AVENUE, # 12  
City-St-Zip: DORAL, FL 33172 US

Title: VP ( ) Delete  
Name: ROSALES, JOSE  
Address: 1375 N.W. 97 AVENUE, # 12  
City-St-Zip: DORAL, FL 33172 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: VASQUEZ, YRANA A  
Address: 1375 N.W. 97 AVENUE, # 14  
City-St-Zip: DORAL, FL 33172 US

Title: VP (X) Change ( ) Addition  
Name: ARROLIGA, JORGE L  
Address: 1375 N.W. 97 AVENUE, # 14  
City-St-Zip: DORAL, FL 33172 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.

SIGNATURE: YRANA A VASQUEZ

P

10/24/2008

Electronic Signature of Signing Officer or Director

Date