2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000010709

City-St-Zip:

MIAMI, FL 33193

Entity Name: PAN DE VIDA DISTRIBUTORS, INC.

FILED May 01, 2009 Secretary of State

| y | er TANGE | VIBA BIOTABOTORO. IIVO | | | |
|--|--|--|--|--|--|
| Current P | rincipal Place | e of Business: | New Principal Place | New Principal Place of Business: | |
| 15201 SW | 80 ST | | | | |
| APT. 302 MIAMI, FL | 33193 | | | | |
| Current Mailing Address: | | | New Mailing Address | New Mailing Address: | |
| 15201 SW APT. 302 MIAMI, FL | | | | | |
| FEI Number: | : 26-1856666 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| BERNAL, RAFAEL E SR 15201 SW 80 ST APT 302 MIAMI, FL 33193 US | | | BERNAL, RAFAEL E S 15201 SW 80 ST APT. 302 MIAMI, FL 33193 US | APT. 302 | |
| | named entity e of Florida. | submits this statement for the p | urpose of changing its registered | d office or registered agent, or both, | |
| SIGNATURE: | | | | 05/01/2009 | |
| Electronic Signature of Registered Agent | | | ent | Date | |
| | | 93(2)(b), F.S., the corporation did no g Trust Fund Contribution (). | t receive the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | P (BERNAL, RAFA 15201 SW 80 MIAMI, FL 331 | ST. APT. 302 | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | VP (BOZO, ROSA (15201 SW 80 MIAMI, FL 331 | ST. APT. 302 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | T (BERNAL, MAR 15201 SW 80 | | Title: Name: Address: | () Change () Addition | |

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.

City-St-Zip:

SIGNATURE: RAFAEL E BERNAL P 05/01/2009