2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# P08000059703

Entity Name: THE TORRES BROTHERS INC

Current Principal Place of Business:

6280 W SAMPLE ROAD
206
CORAL SPRINGS, FL 33067 US

New Principal Place of Business:

Current Mailing Address:

6280 W SAMPLE ROAD
206
CORAL SPRINGS, FL 33067 US

New Mailing Address:

FEI Number: 33-1217639 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TORRES, FABIO
6940 NW 179 ST
303
MIAMI LAKES, FL 33015 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: TORRES, FABIO
Address: 6940 NW 179 ST APT 303
City-St-Zip: MIAMI LAKES, FL 33015 US

Title: VP ( ) Delete
Name: TORRES, EVARISTO
Address: 6940 NW 179 ST APT 303
City-St-Zip: MIAMI LAKES, FL 33015 US

Title: D ( ) Delete
Name: TORRES, APOLINAR
Address: 6940 NW 179 ST APT 303
City-St-Zip: MIAMI LAKES, FL 33015 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: EVARISTO TORRES VP 04/24/2009

Electronic Signature of Signing Officer or Director Date