2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Nov 17, 2009
Secretary of State

DOCUMENT# P08000086631

Entity Name: SAPOARA CORPORATION

Current Principal Place of Business:

8850 FONTAINEBLEAU BLVD
305
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

8850 FONTAINEBLEAU BLVD
305
MIAMI, FL 33172

New Mailing Address:

P.O. BOX 720516
MIAMI, FL 33172

FEI Number: 26-3874415 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSENOW, MANFRED ESQ
601 SW 57TH AVE SUITE B
MIAMI, FL 33144 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

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: NAVARRO, ADOLFO
Address: 8850 FONTAINEBLEAU BLVD 305
City-St-Zip: MIAMI, FL 33172

Title: VP ( ) Delete
Name: NAVARRO, JULIA
Address: 8850 FONTAINEBLEAU BLVD 305
City-St-Zip: MIAMI, FL 33172

Title: ST ( ) Delete
Name: ADRIAN, IRMA
Address: 8850 FONTAINEBLEAU BLVD 305
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: NAVARRO, JULIA
Address: P.O. BOX 720516
City-St-Zip: MIAMI, FL 33172

Title: VP (X) Change ( ) Addition
Name: NAVARRO, JULIA
Address: P.O. BOX 720516
City-St-Zip: MIAMI, FL 33172

Title: ST (X) Change ( ) Addition
Name: ADRIAN, IRMA
Address: P.O. BOX 720516
City-St-Zip: MIAMI, FL 33172

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: JULIA NAVARRO P 11/17/2009

Electronic Signature of Signing Officer or Director — Date