## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000099498

Entity Name: BR SALSA PRODUCTIONS, INC.

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
	/ 34 AVENUE RDENS, FL 330	56 US			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
	640 BOX 540993 (A, FL 33056	US	PO BOX 540993 OPALOCKA, FL 33054	US	
FEI Number	: 80-0301004	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and	d Address of Cu	rrent Registered Agent:	Name and Address of N	lew Registered Agent:	
19815 NW	, BOBBY SR. / 34 AVENUE RDENS, FL 330	56 US			
	e named entity su e of Florida.	bmits this statement for the p	ourpose of changing its registered o	ffice or registered agent, or both,	
SIGNATUI	RE:				
	Electronic	Signature of Registered Age	ent	Date	
Election Car	mpaign Financing 1	rust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES () D ROSARIO, BOBB 19815 NW 34 AV MIAMI GARDENS	Y SR. ENUE	Title: ( ) Name: Address: City-St-Zip:	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () C ROSARIO, ANA R 19815 NW 34 AV MIAMI GARDENS	ENUE	Title: ( ) Name: Address: City-St-Zip:	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TREA () D MERCADO, ROSA 8521 NW SOUTH MIAMI GARDENS	ALINDA RIVER DRIVE	Title: ( ) Name: Address: City-St-Zip:	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SCTY () D MERCADO, AXEL 8521 NW SOUTH MIAMI GARDENS	. R RIVER DRIVE	Title: ( ) Name: Address: City-St-Zip:	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.

SIGNATURE: BOBBY ROSARIO P 04/21/2009