2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P93000050078

FILED Apr 24, 2009 Secretary of State

Entity Name: P&R TROPICAR ENTERPRISES, INC. **Current Principal Place of Business: New Principal Place of Business:** 520 SO. DIXIE HWAY HOLLYWOOD, FL 33020 US **Current Mailing Address: New Mailing Address:** 520 SO. DIXIE HWAY HOLLYWOOD, FL 33020 US FEI Number: 65-0414272 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DE LA ROSA, REINALDO 520 SO. DIXIÉ HIGHWAY HOLLYWOOD, FL 33020 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: Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition HUCALUK, PAUL D DE LA ROSA, REINALDO Name: Name: 6920 S.W. 16TH STREET 10660 N.W 21 CT. Address: Address: City-St-Zip: PEMBROKE PINES, FL 33023 City-St-Zip: PEMBROKE PINES, F 33020

Title: (X) Delete Title: () Change () Addition

Name: DE LA ROSA, REINALDO Name: 10660 NW 21 CT Address: Address: PEMBROKE PINES, FL 33026 City-St-Zip: 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.

Ρ SIGNATURE: REINALDO DE LA ROSA 04/24/2009