

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000026714

Entity Name: AFRINVEST, INC.

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

1441 BRICKELL AVENUE
SUITE 1400
MIAMI, FL 33131 US

Current Mailing Address:

1441 BRICKELL AVENUE
SUITE 1400
MIAMI, FL 33131 US

New Principal Place of Business:

C/O 1441 BRICKELL AVENUE
SUITE 1400
MIAMI, FL 33131 US

New Mailing Address:

C/O ROBERT ALLEN LAW
1441 BRICKELL AVE SUITE 1400
MIAMI, FL 33131 US

FEI Number: 65-0766454

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERT ALLEN LAW
1441 BRICKELL AVENUE
SUITE 1400
MIAMI, FL 33131 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: VPD () Delete
Name: LOPEZ ALFARO, LUIS R
Address: 1441 BRICKELL AVENUE, SUITE 1400
City-St-Zip: MIAMI, FL 33131

Title: SD () Delete
Name: MORENO, RODRIGO ALBE, RTO
Address: 1441 BRICKELL AVENUE, SUITE 1400
City-St-Zip: MIAMI, FL 33131

Title: TD () Delete
Name: FERRER DE CARLES, EN, NA MARIA
Address: 1441 BRICKELL AVENUE, SUITE 1400
City-St-Zip: MIAMI, FL 33131

Title: PD () Delete
Name: RAMIREZ TEJADA, ALFREDO
Address: 1441 BRICKELL AVENUE, SUITE 1400
City-St-Zip: MIAMI, FL 33131

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:

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: LUIS R. LOPEZ ALFARO

VP

04/30/2007

Electronic Signature of Signing Officer or Director

Date