

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000070400

FILED
Apr 22, 2009
Secretary of State

Entity Name: ARGENTINE CHEESE CORPORATION

Current Principal Place of Business:

999 BRICKELL AVENUE
SUITE 1001
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 583
SIMSBURY, CT 06070

New Mailing Address:

FEI Number: 22-3493233

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED CORPORATE SERVICES, INC.
9200 SOUTH DADELAND BLVD.
SUITE 508
MIAMI, FL 331560000 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: FVPD () Delete
Name: AON, SANTIAGO
Address: 999 BRICKELL AVENUE, SUITE 1001
City-St-Zip: MIAMI, FL 33131

Title: ST () Delete
Name: SECCO, JORGE M
Address: 999 BRICKELL AVENUE, SUITE 1001
City-St-Zip: MIAMI, FL 33131

Title: PC () Delete
Name: CURIOTTI, ALFREDO
Address: 999 BRICKELL AVE STE 1001
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: LUDUENA, JORGE O
Address: 999 BRICKELL AVENUE, SUITE 1001
City-St-Zip: MIAMI, FL 33131

Title: AS () Delete
Name: CAMERINI, EZEQUIEL
Address: 999 BRICKELL AVE STE 1001
City-St-Zip: MIAMI, FL 33131

Title: VP () Delete
Name: SENOSIAIN, ALBERTO J.
Address: 999 BRICKELL AVE., STE. 1001
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:

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Name:
Address:
City-St-Zip:

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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: ALBERT J. SENOSIAIN

MR.

04/22/2009

Electronic Signature of Signing Officer or Director

Date