2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 27, 2009
Secretary of State

DOCUMENT# P96000070400

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

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:

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: VP (X) Change ( ) Addition
Name: SILPE, MARZENA
Address: 165 NEPTUNE DRIVE
City-St-Zip: GROTON, CT 06340

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: MARZENA SILPE VP 05/27/2009
Electronic Signature of Signing Officer or Director Date