

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000092276

Entity Name: COFFEEGRAIN GROUP, INC.

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

2739 W 79 ST
BAY # 13
HIALEAH, FL 33016 US

New Principal Place of Business:

Current Mailing Address:

2739 W 79 ST
BAY # 13
HIALEAH, FL 33016 US

New Mailing Address:

FEI Number: 65-0709526 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALDERON, JUAN M
2739 W. 79 ST. BAY #13
HIALEAH, FL 33016 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: P () Delete
Name: GOMEZ, LINA M
Address: 2739 W 79 ST BAY # 13
City-St-Zip: HIALEA, FL 33016 US

Title: VPT () Delete
Name: GOMEZ MORA, ALEJANDRO
Address: CRA 51 # 52-23
City-St-Zip: SEVILLA, VA CO

Title: VPS () Delete
Name: GOMEZ, CARLOS D
Address: CRA 51 # 52-23
City-St-Zip: SEVILLA, VA CO

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GOMEZ, LINA M
Address: 2739 W 79 ST BAY # 13
City-St-Zip: HIALEAH, FL 33016 US

Title: VPT (X) Change () Addition
Name: GOMEZ, ALEJANDRO
Address: CRA 51 # 52-23
City-St-Zip: SEVILLA, VA CO

Title: VPS (X) Change () Addition
Name: GOMEZ, DIEGO F
Address: CRA 51 # 52-23
City-St-Zip: SEVILLA, VA CO

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: LINA MARCELA GOMEZ

P

04/20/2009

Electronic Signature of Signing Officer or Director

_____ Date