## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000104165

Entity Name: IBERO-AMERICA TRADING, INC.

FILED Jun 16, 2<u>00</u>8 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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13270 S.W. 99 TERRACE MIAMI, FL 33186

**Current Mailing Address: New Mailing Address:** 

13270 S.W. 99 TERRACE MIAMI, FL 33186

FEI Number: 65-0751858 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 ARMAS, J. ALFREDO DE ARMAS, J. ALFREDO 255 UNIVERSITY DRIVE 901 PONCÉ DE LEON BOULEVARD CORAL GABLES, FL 33134 US SUITE 304 CORAL GABLES, FL 33134 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: J. ALFREDO DE ARMAS 06/16/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Address:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition CASTELLON, OSCAR M SANZ, FRANCISCO Name: Name: 13270 S.W. 99 TERRACE 13270 S.W. 99 TERRACE Address: Address:

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

Title: VD Title: VSD (X) Change ( ) Addition () Delete SANZ, FRANCISCO SANZ. SANTIAGO Name: Name:

13270 S.W. 99 TERRACE 13270 S.W. 99 TERRACE Address: Address: MIAMI, FL 33186 MIAMI, FL 33186 City-St-Zip: City-St-Zip:

Title: Title: ( ) Delete VTD (X) Change ( ) Addition BADENES, PILAR BADENES, PILAR Name: Name:

13270 S.W. 99 TERRACE 13270 S.W. 99 TERRACE Address: Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

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

SANZ, MARIA Name: 13270 S.W. 99 TERRACE Address: City-St-Zip: MIAMI, FL 33186 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: FRANCISCO SANZ PD 06/16/2008