2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE: __

SIGNATURE AND TYPED OR PE

FILED Apr 14, 2008 08:00 A Secretary of State DOCUMENT # P98000002228 1. Entity Name TOQUE BRASIL INC. Principal Place of Business 1 Mailing Address 10055 SUNSET STRIP 10055 SUNSET STRIP SUNRISE, FL 33322 SUNRISE, FL 33322 04092008 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Not Applicable 65-0807131 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent AQUILINO, JULIANA DO NOT WRITE 3961 N. FED HWY POMPANO BCH, FL 33064 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PVST THE NAME BAUMER, JORGE A HANAAA895863 STREET ADDRESS 10055 SUNSET STRIP CITY-ST-ZIP SUNRISE, FL 33322 TITLE NAME BAUMER, JORGE A STREET ADDRESS 10055 SUNSET STRIP CITY-ST-7P SUNRISE, FL 33322 TITLE NAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP TATLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THLE MARKE STREET ADDRESS CITY-ST-ZIP 12. Thereby certify that the information supplied with this fling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered. 954.578.1030

TED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #