2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000080606

Entity Name: AZTECA MEXICAN AND AMERICAN FOODS, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

114 SAN JOSE

114 SAN JOSE CLEWISTON, FL 33440 CLEWISTON, FL 33440 US

Current Mailing Address: New Mailing Address:

114 SAN JOSE 114 SAN JOSE

CLEWISTON, FL 33440 CLEWISTON, FL 33440 US

FEI Number: 65-0866037 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:

LUNA, ANGEL M 114 SAN JOSE

CLEWISTON, FL 33440 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:

Title:

Date

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition PD () Delete Title: LUNA, ANGEL M LUNA, ANGEL M Name:

Name: 785 A ROAD 785 A ROAD Address: Address:

City-St-Zip: LABELLE, FL 33935 City-St-Zip: LABELLE, FL 33935 US

Title: VPD Title: VPD () Delete (X) Change () Addition LUNA, HERIBERTO M LUNA, HERIBERTO M Name: Name:

110 SUNRISE DRIVE 110 SUNRISE DRIVE Address: Address: FORT PIERCE, FL 34945 FORT PIERCE, FL 34945 US City-St-Zip: City-St-Zip:

() Delete Title: Title: STD STD (X) Change () Addition

CERDA, FRANCISCO Name: CERDA, FRANCISCO Name: 114 SAN JOSE 114 SAN JOSE Address: Address:

City-St-Zip: CLEWISTON, FL 33440 City-St-Zip: CLEWISTON, FL 33440 US

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 CERDA STD 04/28/2009