

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000061354

Entity Name: RONI CAUCHOS CORP.

FILED  
Feb 21, 2008  
Secretary of State

**Current Principal Place of Business:**

11416 NW 43 TERR  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

9211 KENDALE BLVD  
MIAMI, FL 33176

**New Mailing Address:**

FEI Number: 65-0955128

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HMBC INC  
9211 KENDALE BLVD  
MIAMI, FL 33176 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: IMBRONDONE, YIME  
Address: AVE J BAUTISTA-PORLAMAR  
City-St-Zip: MARGARITA, VENEZUELA, OC

Title: V ( ) Delete  
Name: IMBRONDONE, MARIA J  
Address: AVE J BAUTISTA-PORLAMAR  
City-St-Zip: MARGARITA VENEZUELA, OC

Title: D ( ) Delete  
Name: DEL VALLE, ROSANI  
Address: AVE J BAUTISTA-PORLAMAR  
City-St-Zip: MARGARITA VENEZUELA, OC

Title: T ( ) Delete  
Name: DEL VALLE, ITALA  
Address: AVE J BAUTISTA-PORLAMAR  
City-St-Zip: MARGARITA VENEZUELA, OC

**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:

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: ROSANI IMBRONDONE DEL VALLE

D

02/21/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date