

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000065304

FILED
Apr 28, 2009
Secretary of State

Entity Name: PUERTO RICO PACKERS, N.A; INC.

Current Principal Place of Business:

2603 JUDGE LOOP
KISSIMMEE, FL 34743

New Principal Place of Business:

524 MID. FLORIDA DR.
ORLANDO, FL 32824

Current Mailing Address:

2603 JUDGE LOOP
KISSIMMEE, FL 34743

New Mailing Address:

P.O. BOX 770758
ORLANDO, FL 32877

FEI Number: 59-3589851

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALGARIN, ALCIDES
2603 JUDGE LOOP
KISSIMMEE, FL 34743 US

Name and Address of New Registered Agent:

ALCIDES, ALGARIN
524 MID. FLORIDA DR.
ORLANDO, FL 32824 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: ALCIDES ALGARIN

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALGARIN, ALCIDES
Address: 2603 JUDGE LOOP
City-St-Zip: KISSIMMEE, FL 34743

Title: STD () Delete
Name: QUINONES, MILAGROS M
Address: 2603 JUDGE LOOP
City-St-Zip: KISSIMMEE, FL 34743

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALGARIN, ALCIDES
Address: 524 MID. FLORIDA DR.
City-St-Zip: ORLANDO, FL 32824

Title: STD (X) Change () Addition
Name: FIGUEROA, ANA M
Address: 524 MID. FLORIDA DR.
City-St-Zip: ORLANDO, FL 32824

Title: D () Change (X) Addition
Name: ALGARIN, BARBARA
Address: 524 MID. FLORIDA DR.
City-St-Zip: ORLANDO, FL 32824

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: ALCIDES ALGARIN

PRES

04/28/2009

Electronic Signature of Signing Officer or Director

Date