

# 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P99000065304

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

FILED  
Aug 13, 2009  
Secretary of State

## Current Principal Place of Business:

524 MID. FLORIDA DR.  
ORLANDO, FL 32824

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 770758  
ORLANDO, FL 32877

## New Mailing Address:

FEI Number: 59-3589851

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## OFFICERS AND DIRECTORS:

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

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ALCIDES ALGARIN

PRES

08/13/2009

Electronic Signature of Signing Officer or Director

Date