2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S07986

Entity Name: M.C.A. EXPORTERS, INC.

8500 NW 4TH STREET NO. 3

MIAMI, FL 33126

Address: City-St-Zip: FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
14906 SOUTHWEST 12TH LANE MIAMI, FL 33194				14906 SOUTHWEST 12TH LANE MIAMI, FL 33194 US			
Current Mailing Address:				New Mailing Address:			
2121 PONCE DE LEON BLVD.				2121 PONCE DE LEON BLVD.			
STE 240 CORAL GABLES, FL 33134				STE 240 CORAL GABLES, FL 33134 US			
FEI Number:	65-0250885	FEI Number Applied For ()	FEI Nur	mber Not Appl	icable ()	Certifica	ate of Status Desired (X)
Name and	Address of 0	Name and Address of New Registered Agent:					
2121 PON STE. 240	RNANDEZ & CE DE LEON ABLES, FL 33	BLVD					
	named entity of Florida.	submits this statement for t	he purpose o	of changing i	ts registered	d office or i	registered agent, or both,
SIGNATUR	RE:						
	Electro	nic Signature of Registered	Agent				Date
Election Can	npaign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	D'ARNAULT, S TAPANAHONY			Title: Name: Address: City-St-Zip:		() Change	() Addition
Title: Name: Address: City-St-Zip:	D'ARNAULT, C TAPANAHONY			Title: Name: Address: City-St-Zip:		() Change	() Addition
Title: Name:	STD (D'ARNAULT, C) Delete URT		Title: Name:	STD D'ARNAULT,	(X) Change CURT	() Addition

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.

Address:

City-St-Zip:

8500 NW 4TH STREET NO. 3

MIAMI, FL 33126 US

SIGNATURE: STANLEY J D'ARNAULT PD 04/14/2009