2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S22855

FILED Mar 18, 2009 Secretary of State

Entity Name: DELEON'S BROMELIADS, INC. **Current Principal Place of Business: New Principal Place of Business:** 13745 S.W. 216 STREET GOULDS, FL 331702401 **Current Mailing Address: New Mailing Address:** 13745 S.W. 216 STREET GOULDS, FL 331702401 FEI Number: 65-0268297 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARAZOZA COMAS DE TORRES & FERNANDEZ FRAGA 2100 SALZEDO ST., SUITE 300 CORAL GABLES, FL 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete Title: (X) Change () Addition DELEON, ROBERT, DELEON, ROBERT, Name: 34418 PARKWAY AVENUE

Title: Name: 9961 SW 145 TERRACE Address: Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip: EUSTIS, FL 32736

Title: Title: () Change () Addition () Delete

Name: DELEON, DONALD. Name: 11531 SW 132ND AVE Address: Address: MIAMI, FL City-St-Zip: 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.

Ρ SIGNATURE: ROBERT DELEON 03/18/2009