2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# S57920

Entity Name: THE AMERICAS COLLECTION, INC.

FILED Oct 01, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace of Business:	New Principal Place of Business.

2440 PONCE DE LEON BLVD. CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

2440 PONCE DE LEON BLVD. CORAL GABLES, FL 33134

FEI Number: 65-0270421 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:

BOLANOS, JOSE A.

2121 PONCE DE LEON BLVD.

SUITE 1035

CORAL GABLES, FL 33134 US

BOLANOS, JOSE A.

2121 PONCE DE LEON BLVD.

SUITE 950

CORAL GABLES, FL 33134 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: JOSE A BOLANOS 10/01/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 ORTIZ, RAMIRO
 Name:
 ORTIZ, RAMIRO

 Address:
 2440 PONCE DE LEON BLVD
 Address:
 2440 PONCE DE LEON BLVD

City-St-Zip: CORAL GABLES, FL City-St-Zip: CORAL GABLES, FL 33134

Title: VP () Delete Title: VP,T (X) Change () Addition

 Name:
 VALDES-FAULI, DORA
 Name:
 ORTIZ, PATRICIA

 Address:
 2440 PONCE DE LEON BLVD
 Address:
 2440 PONCE DE LEON BLVD

City-St-Zip: CORAL GABLES, FL City-St-Zip: CORAL GABLES, FL 33134

Name: Name: ORTIZ, SILVIA

Address: Address: 2440 PONCE DE LEON BLVD
City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134

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: RAMIRO ORTIZ P 10/01/2007