

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000094106

FILED  
Jan 17, 2007  
Secretary of State

Entity Name: BARANDA LA, INC.

## Current Principal Place of Business:

EDUARDO COSTA 1972  
MARTINEZ B.A. 1640  
ARGENTINA, BA 1640 AR

## New Principal Place of Business:

## Current Mailing Address:

EDUARDO COSTA 1972  
MARTINEZ B.A. 1640  
ARGENTINA, BA 1640 AR

## New Mailing Address:

FEI Number: 65-0876100      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AMERILAWYER  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LOPEZ, JUAN C  
Address: EDUARDO COSTA 1972  
City-St-Zip: MARTINEZ-BUENOS AIRES ARGENT, BA 1640 AR

Title: SVD ( ) Delete  
Name: TOUCEDA, ADELAIDA  
Address: EDUARDO COSTA 1972  
City-St-Zip: MARTINEZ-BUENOS AIRES-ARGENT, BA 1640 AR

Title: VD ( ) Delete  
Name: TOUCEDA, MELINA L  
Address: EDUARDO COSTA 1972  
City-St-Zip: MARTINEZ-BUENOS AIRES-ARGENT, BA 1640 AR

Title: VD ( ) Delete  
Name: TOUCEDA, CAROLINA L  
Address: EDUARDO COSTA 1972  
City-St-Zip: MARTINEZ-BUENOS AIRES-ARGENT, BA 1640 AR

Title: TD ( ) Delete  
Name: TOUCEDA, LUCAS L  
Address: EDUARDO COSTA 1972  
City-St-Zip: MARTINEZ-BUENOS AIRES-ARGENT, BA 1640 AR

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JUAN CARLOS LOPEZ

PD

01/17/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date