

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000131754

FILED  
Mar 06, 2007  
Secretary of State

Entity Name: ITALMIVEN TRADUCTORES & ASOCIADOS CORP.

**Current Principal Place of Business:**

18855 NE 29 AVE  
SUITE 700  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 802004  
AVENTURA, FL 33280

**New Mailing Address:**

FEI Number: 01-0763453      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MARTINEZ, MARISOL A  
1770 SW 118 AVE  
MIRAMAR, FL 33025      US

**Name and Address of New Registered Agent:**

ADRIANA, RODRIGUEZ L  
18851 NE 29 AVE  
SUITE 700  
AVENTURA, FL, FL 33180 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: M ALVAREZ

03/06/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: S      ( ) Delete  
Name: ALVAREZ, MARIANELLA  
Address: 20400 N COUNTRY CLUB DR, APT 104  
City-St-Zip: AVENTURA, FL 33180

Title: P      ( ) Delete  
Name: MARTINEZ, MARISOL A  
Address: 1770 SW 118 AVE  
City-St-Zip: MIRAMAR, FL 33025

Title: V      ( ) Delete  
Name: LOBATO, JOAO G  
Address: 1770 SW 118 AVE  
City-St-Zip: MIRAMAR, FL 33025

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: P      (X) Change ( ) Addition  
Name: RODRIGUEZ, ADRIANA L  
Address: 18851 NE 29 AVE, SUITE 700  
City-St-Zip: AVENTURA,, FL 33180

Title: V      (X) Change ( ) Addition  
Name: LOBATO, JOAO G  
Address: 18851 NE 29 AVE, SUITE 700  
City-St-Zip: AVENTURA, FL 33180

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: MARIA ALVAREZ

D

03/06/2007

Electronic Signature of Signing Officer or Director

Date