## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000069838

Entity Name: ISLA DE BAYAMON CORP

FILED May 01, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3601 KARIBA COURT 4081 SANTA BARBARA RD KISSIMMEE, FL 34746 KISSIMMEE, FL 34746 **Current Mailing Address: New Mailing Address:** 3601 KARIBA COURT 4081 SANTA BARBARA RD KISSIMMEE, FL 34746 KISSIMMEE, FL 34746 FEI Number: 51-0514567 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: SEPULVEDA, PATRICIA S SEPULVEDA, PATRICIA S 3601 KARIBA COURT 4081 SANTA BARBARA RD KISSIMMEE, FL 34746 KISSIMMEE, FL 34746 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: 05/01/2009 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete (X) Change ( ) Addition SEPULVEDA, PATRICIA S SEPULVEDA, PATRICIA S Name: Name: 3601 KARIBA COURT 4081 SANTA BARBARA RD Address: Address: City-St-Zip: KISSIMMEE, FL 34746 City-St-Zip: KISSIMMEE, FL 34746 Title: Title: () Delete () Change () Addition SEPULVEDA, YAJAIRA Name: Name: 3513 SUNSET ISLES BLVD Address: Address: KISSIMMEE, FL 34746 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition RAMOS, ADAM J Name: Name: 3513 SUNSET ISLES BLVD Address: Address: City-St-Zip: KISSIMMEE, FL 34746 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition SEPULVEDA, JOSE E SR SEPULVEDA, JOSE E SR Name: Name: Address: 2632 WILLOW GLEN CIR. Address: 4081 SANTA BARBARA RD City-St-Zip: City-St-Zip: KISSIMMEE, FL 34744 KISSIMMEE, FL 34746 Title: Title: ( ) Delete () Change () Addition SEPULVEDA, HECTOR A Name: Name: 2632 WILLOW GLEN CIR. Address: Address: City-St-Zip: KISSIMMEE, FL 34744 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.

SIGNATURE: PATRICIA S SEPULVEDA P 05/01/2009