

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000100494

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: INVERSIONES BARBARA, CORP.

## Current Principal Place of Business:

1200 BRICKELL AVE SUITE 860  
MIAMI, FL 33131

## New Principal Place of Business:

## Current Mailing Address:

1200 BRICKELL AVE SUITE 860  
MIAMI, FL 33131

## New Mailing Address:

FEI Number: 20-8918602

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOPEZ, PETER M  
1911 NW 150 AVE #201  
PEMBROKE PINES, FL 33028 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: PSD ( ) Delete  
Name: LO IACONO GISONE, FRANCISCO P  
Address: 1200 BRICKELL AVE SUITE 860  
City-St-Zip: MIAMI, FL 33131

Title: TD ( ) Delete  
Name: CILIA LOPEZ, LEIDY S  
Address: 1200 BRICKELL AVE SUITE 860  
City-St-Zip: MIAMI, FL 33131

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: LOIACONO FRANCISCO

PSD

04/30/2008

Electronic Signature of Signing Officer or Director

Date