

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000127635

**FILED**  
**May 11, 2011**  
**Secretary of State**

**Entity Name:** COLICO INVESTMENT CORP.

**Current Principal Place of Business:**

1986 NE 149TH STREET  
NORTH MIAMI, FL 33181

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 610338  
ATTN: FRANCISCO SILVA  
NORTH MIAMI, FL 33261

**New Mailing Address:**

**FEI Number:** 20-4094948      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SANCHEZ-ABALLI, RAFAEL ESQ.  
2506 PONCE DE LEON BLVD.  
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

**OFFICERS AND DIRECTORS:**

Title: P/D  
Name: GUZMAN, JOSE A P/D  
Address: P.O. BOX 610338  
City-St-Zip: NORTH MIAMI, FL 33261 US

Title: VP/D  
Name: LARRAIN, JUAN A  
Address: P.O. BOX 610338  
City-St-Zip: NORTH MIAMI, FL 33261

Title: S/D  
Name: GUZMAN, NICOLAS  
Address: P.O. BOX 610338  
City-St-Zip: NORTH MIAMI, FL 33261

Title: VP/D  
Name: SILVA, FRANCISCO A  
Address: P.O. BOX 610338  
City-St-Zip: NORTH MIAMI, FL 33261

I hereby 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 all other like empowered.

SIGNATURE: RAFAEL SANCHEZ-ABALLI ESQ.

AIF

05/11/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date