

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000143921

FILED  
Jan 06, 2009  
Secretary of State

Entity Name: IVY D.C.S.A. INVESTMENTS, INC.

## Current Principal Place of Business:

407 LICOLN RD  
PH-N  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

407 LINCOLN RD  
PH-N  
MIAMI BEACH, FL 33139

## Current Mailing Address:

407 LICOLN RD  
PH-N  
MIAMI BEACH, FL 33139

## New Mailing Address:

407 LINCOLN RD  
PH-N  
MIAMI BEACH, FL 33139

FEI Number: 20-3779873

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MURAI WALD BIONDO MORENO & BROCHIN, PA  
TWO ALHAMBRA PLAZA  
PENTHOUSE 1B  
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: P ( ) Delete  
Name: GAVILAN, MIGUEL A  
Address: 407 LINCOLN RD PH-N  
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP ( ) Delete  
Name: TORRES, ANGEL E  
Address: 407 LINCOLN RD PH-N  
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP ( ) Delete  
Name: ARDID, JOSE  
Address: 848 BRICKELL ABE SUITE 700  
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:

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: A. TORRES

VP

01/06/2009

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

\_\_\_\_\_  
Date