

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000032105

Entity Name: MALO VENTURES, INC.

FILED  
Jan 20, 2012  
Secretary of State

**Current Principal Place of Business:**

8232 NORTHWEST 30TH TERRACE  
MIAMI, FL 33122

**New Principal Place of Business:**

**Current Mailing Address:**

8232 NORTHWEST 30TH TERRACE  
MIAMI, FL 33122

**New Mailing Address:**

FEI Number: 27-2382507

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VILA, OSCAR J ESQ  
C/O VILA PADRON & DIAZ, P.A.  
2320 PONCE DE LEON BLVD., SECOND FLOOR  
CORAL GABLES, FL 33134 US

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

WORLDWIDE CORPORATE ADMINISTRATORS  
2330 PONCE DE LEON BLVD  
SUITE 201  
CORAL GABLES, FL 33134 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: JANICE CAYON

01/20/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: MONSALVE, MANUEL M  
Address: 8232 NORTHWEST 30TH TERRACE  
City-St-Zip: MIAMI, FL 33122

Title: D  
Name: MALO, SEBASTIAN  
Address: 8232 NORTHWEST 30TH TERRACE  
City-St-Zip: MIAMI, FL 33122

Title: D  
Name: MALO, MANUEL A  
Address: 8232 NORTHWEST 30TH TERRACE  
City-St-Zip: MIAMI, FL 33122

Title: D  
Name: MALO, JUAN J  
Address: 8232 NORTHWEST 30TH TERRACE  
City-St-Zip: MIAMI, FL 33122

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: MANUEL MONSALVE

DP

01/20/2012

Electronic Signature of Signing Officer or Director

Date