

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000090660

Entity Name: SETAMA ENTERPRISES INC

FILED  
Apr 25, 2011  
Secretary of State

**Current Principal Place of Business:**

14824 SW 90 TERRACE  
MIAMI, FL 33196 US

**New Principal Place of Business:**

**Current Mailing Address:**

14824 SW 90 TERRACE  
MIAMI, FL 33196 US

**New Mailing Address:**

FEI Number: 27-4059480

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TRIBIE, MIREILLE  
14824 SW 90 TERRACE  
MIAMI, FL 33196 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  
Name: TRIBIE, MIREILLE  
Address: 14824 SW 90 TERRACE  
City-St-Zip: MIAMI, FL 33196 US

Title: VP  
Name: LAUREANO-CEPEDA, TATIANA  
Address: 14824 SW 90 TERRACE  
City-St-Zip: MIAMI, FL 33196 US

Title: T  
Name: LAUREANO, SEBASTIAN  
Address: 14824 SW 90 TERRACE  
City-St-Zip: MIAMI, FL 33196 US

Title: S  
Name: LAUREANO, MANUEL DAVID  
Address: 14824 SW 90 TERRACE  
City-St-Zip: MIAMI, FL 33196 US

Title: AS  
Name: RABEL, THIERRY  
Address: 14824 SW 90 TERRACE  
City-St-Zip: MIAMI, FL 33196 US

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 D LAUREANO

S

04/25/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date