2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2011
Secretary of State

DOCUMENT# P10000100773

Entity Name: KOVALIN CORP.

Current Principal Place of Business:

901 PONCE DE LEON BOULEVARD
SUITE 305
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

901 PONCE DE LEON BOULEVARD
SUITE 305
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALEMANY, JOAQUIN A
901 PONCE DE LEON BOULEVARD
SUITE 305
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
Name: VALERO DE KOURY, LIGIA B
Address: 901 PONCE DE LEON BOULEVARD, SUITE 305
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VP
Name: KOURY VALERO, ALEJANDRO
Address: 901 PONCE DE LEON BOULEVARD, SUITE 305
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VP
Name: KOURY, ALVARO
Address: 901 PONCE DE LEON BOULEVARD, SUITE 305
City-St-Zip: CORAL GABLES, FL 33134 US

Title: S /T
Name: KOURY VALERO, IGNACIO
Address: 901 PONCE DE LEON BOULEVARD, SUITE 305
City-St-Zip: CORAL GABLES, FL 33134

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: LIGIA B. VALERO DE KOURY P 04/28/2011

Electronic Signature of Signing Officer or Director — Date