

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000067183

Entity Name: MATIOK, INC.

FILED  
Mar 17, 2011  
Secretary of State

**Current Principal Place of Business:**

600 GRAPETREE DRIVE  
APT 10DN  
KEY BISCAYNE, FL 33149

**New Principal Place of Business:**

**Current Mailing Address:**

7801 NW 37TH ST  
SECTION 1231 / GUA  
DORAL, FL 33166

**New Mailing Address:**

FEI Number: 65-0732626      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LOWMAN, ROBERT M PA  
2730 SW 3RD AVE  
SUITE 800  
MIAMI, FL 33129 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: D  
Name: CASTILLO DE MATA, MARIA LUISA  
Address: 20 CALLE 4-60 ZONA 10 INT. 3B  
City-St-Zip: GUATEMALA CITY, GU GUATEMALA

Title: DR  
Name: MATA C, GUILLERMO  
Address: 12 CALLE 6-40 ZONA 9  
City-St-Zip: GUATEMALA CITY, GU GUATEMALA

Title: DR  
Name: MATA C, ESTUARDO  
Address: DIAGONAL 6, 10-01 ZONA 10  
City-St-Zip: GUATEMALA CITY, GU GUATEMALA

Title: MRS  
Name: MATA DE ARIAS, LUISA MARIA  
Address: DIAGONAL, 6 10-01 ZONA 10  
City-St-Zip: GUATEMALA CITY, GU GUATEMALA

Title: MR  
Name: MATA C, CARLOS ENRIQUE  
Address: 20 CALLE 6-40 ZONA 10 INT. 3B  
City-St-Zip: GUATEMALA CITY, GU GUATEMALA

Title: MRS  
Name: MATA, ANA ISABEL  
Address: 20 CALLE 6-40 ZONA 10 INT, 3B  
City-St-Zip: GUATEMALA CITY, GU GUATEMALA

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: ESTUARDO MATA

DR

03/17/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date