

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000075600

Entity Name: CENTINELA TWO, INC.

FILED
Jan 22, 2009
Secretary of State

Current Principal Place of Business:

ISIDORA GOYENECHEA 3621 OF 1901
LAS CONDES SANTIAGO, CHILE,

New Principal Place of Business:

ISIDORA GOYENECHEA 3621 OF 1901
LAS CONDES SANTIAGO, CHILE, XX

Current Mailing Address:

ISIDORA GOYENECHEA 3621 OF 1901
LAS CONDES SANTIAGO, CHILE,

New Mailing Address:

ISIDORA GOYENECHEA 3621 OF 1901
LAS CONDES SANTIAGO, CHILE, XX

FEI Number: 98-0458055

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 E. PARK AVE.
TALLAHASSEE, FL 32301 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: D () Delete
Name: PAVEZ, JUAN C
Address: ISIDORA GOYENECHEA 3621 OF 1901
City-St-Zip: LAS CONDES SANTIAGO, CHILE,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PAVEZ, JUAN C
Address: ISIDORA GOYENECHEA 3621 OF 1901
City-St-Zip: LAS CONDES SANTIAGO, CHILE, XX

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: JUAN CRISTOBAL PAVEZ RECART

CEO

01/22/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date