

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011582

Entity Name: SAN IGNACIO USA, INC.

FILED
Feb 22, 2009
Secretary of State

Current Principal Place of Business:

15758 NW 10TH STREET
PEMBROKE PINES, FL 33028

New Principal Place of Business:

Current Mailing Address:

15758 NW 10TH STREET
PEMBROKE PINES, FL 33028

New Mailing Address:

FEI Number: 83-0467692

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOSTELMANN, GUNTER
15758 NW 10TH STREET
PEMBROKE PINES, FL 33028 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 () Delete
Name: BOSTELMANN, GUNTER
Address: 15758 NW 10TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D () Delete
Name: TORRES, ANTONIO
Address: 1091 GOLDEN CANE DR.
City-St-Zip: WESTON, FL 33327

Title: D () Delete
Name: FLAMINI, FIDEL
Address: 8010 OLD CUTLER ROAD
City-St-Zip: CORAL GABLES, FL 33143

Title: D () Delete
Name: AGUERREVERE, GONZALO
Address: 4412 NW 97TH CT
City-St-Zip: DORAL, FL 33178

Title: D () Delete
Name: ARENAS, CARLOS M
Address: 2104 NE 44TH STREET
City-St-Zip: LIGHTHOUSE POINT, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GUNTER BOSTELLMANN

D

02/22/2009

Electronic Signature of Signing Officer or Director

Date