

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 565194

Entity Name: CARTIA, INC.

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

10928 N.W. 69TH STREET
DORAL, FL 33178 US

New Principal Place of Business:

9965 SW 31 TERR
MIAMI, FL 33165 US

Current Mailing Address:

10928 N.W. 69TH STREET
DORAL, FL 33178 US

New Mailing Address:

9965 SW 31 TERR
MIAMI, FL 33165 US

FEI Number: 59-2019272

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEEPLS, L. GRANT
9965 SW 31 TERRACE
MIAMI, FL 33165 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: PD () Delete
Name: DE MOGOLLON, MARGARITA
Address: EDIFICIO MARLIN #11A
City-St-Zip: CARTAGENA, COLOMBIA, CO 00000 CO

Title: D () Delete
Name: MOGOLLON, PEDRO L
Address: EDIFICIO MARLIN #11A
City-St-Zip: CARTAGENA, COLOMBIA, CO 00000 CO

Title: D () Delete
Name: MOGOLLON, ELENA
Address: EDIFICIO MARLIN #11A
City-St-Zip: CARTAGENA, COLOMBIA, CO 00000 CO

Title: PD () Delete
Name: MOGOLLON, V JOSE V
Address: EDIFICIO MARLIN #11A
City-St-Zip: CARTAGENA, COLOMBIA, CO 00000 CO

Title: D () Delete
Name: MOGOLLON, FERNANDO
Address: EDIFICIO MARLIN #11A
City-St-Zip: CARTAGENA, COLOMBIA, CO 00000 CO

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

SIGNATURE: ELENA MOGOLLON

D

04/22/2009

Electronic Signature of Signing Officer or Director

Date