

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000100034

**FILED**  
**Apr 15, 2013**  
**Secretary of State**  
**CC4389668198**

**Entity Name:** LIMA PROPERTY INVESTMENTS INC.

**Current Principal Place of Business:**

5489 WILES RD, STE 304  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

5489 WILES RD, STE 304  
COCONUT CREEK, FL 33073 US

**FEI Number:** 20-3166962

**Certificate of Status Desired:** No

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

LIMA, KRISTIN  
5489 WILES RD SUITE 304  
COCONUT CREEK, FL 33073 US

*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

**Officer/Director Detail :**

Title P  
Name LIMA, GENY  
Address 5489 WILES RD, STE 304  
City-State-Zip: COCONUT CREEK FL 33073

Title VP  
Name LIMA, OCTAVIO  
Address 5489 WILES RD, STE 304  
City-State-Zip: COCONUT CREEK FL 33073

Title SEC  
Name LIMA, KRISTIN  
Address 5489 WILES RD, STE 304  
City-State-Zip: COCONUT CREEK FL 33073

Title TREA  
Name KRISTIN, LIMA  
Address 5489 WILES RD, STE 304  
City-State-Zip: COCONUT CREEK FL 33073

*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:** KRISTIN LIMA

**SEC**

**04/15/2013**

Electronic Signature of Signing Officer/Director Detail

Date