

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000062673

**Entity Name:** VILLA ISABEL ALF, CORP.

**Current Principal Place of Business:**

7265 NW 5TH STREET  
MIAMI, FL 33126

**Current Mailing Address:**

7265 NW 5TH STREET  
MIAMI, FL 33126

**FEI Number:** 65-0850423

**Certificate of Status Desired:** No

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

VILLAVERDE, MYRIAM I  
7265 NW 5TH STREET  
MIAMI, FL 33126 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	Title	VP
Name	VILLAVERDE, MYRIAM I	Name	VARQUIN, LISSETT
Address	7265 NW 5TH STREET	Address	7265 NW 5TH STREET
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126

*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:** VILLAVERDE MYRIAM I

P

04/10/2013

Electronic Signature of Signing Officer/Director Detail

Date