

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 552922

FILED  
Feb 10, 2011  
Secretary of State

Entity Name: ISMAORLU, INC.

**Current Principal Place of Business:**

3251-53 NW NORTH RIVER DRIVE  
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

3251-53 NW NORTH RIVER DRIVE  
MIAMI, FL 33142

**New Mailing Address:**

FEI Number: 59-1780340

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RIESGO, LELIA  
285 E OKEECHOBEE ROAD  
HIALEAH, FL 33010 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: PD  
Name: RIESGO, LEILA  
Address: 285 E OKEECHOBEE ROAD  
City-St-Zip: HIALEAH, FL 33010

Title: VSD  
Name: RIESGO, ORLANDO  
Address: 920 SE 8TH STREET  
City-St-Zip: HIALEAH, FL 33010

Title: D  
Name: RIESGO, ISABEL  
Address: 920 SE 8TH STREET  
City-St-Zip: HIALEAH, FL 33010

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: LEILA RIESGO

PD

02/10/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date