

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 595112

FILED  
Jan 10, 2012  
Secretary of State

Entity Name: ORLANDO WOODS ESTATES, INC.

**Current Principal Place of Business:**

1111 BRICKELL BAY DR.  
# 2304  
MIAMI, FL 33131 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 144491  
CORAL GABLE, FL 33114 US

**New Mailing Address:**

FEI Number: 59-2339442      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

TORRES, EDUARDO P  
1111 BRICKELL BAY DR.  
# 2304  
MIAMI, FL 33131 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: P  
Name: TORRES EDUARDO  
Address: 1111 BRICKELL BAY DR. # 2304  
City-St-Zip: MIAMI, FL 33131 US

Title: VD  
Name: DE ABREU MANUEL DA CORTE  
Address: AV. VERACRUZ, EDIF. MARACAIBO, OF.800  
City-St-Zip: CARACAS, DC 1070 VE

Title: D  
Name: DE ABREU JOSE DA SILVA  
Address: AV. VERACRUZ, EDIF. MARACAIBO, OF.800  
City-St-Zip: CARACAS, DC 1070 VE

Title: D  
Name: MARTINEZ MANUEL HERMINIO  
Address: AV. LIBERTADOR. TORRE LAS DELICIAS 9-D  
City-St-Zip: CARACAS, DC 1070 VE

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: EDUARDO T. TORRES

P

01/10/2012

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

\_\_\_\_\_ Date