

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004192

Entity Name: ALEGALLOLA, S.A.

FILED  
Apr 21, 2011  
Secretary of State

## Current Principal Place of Business:

300 ARAGON AVENUE,  
SUITE 210  
CORAL GABLES, FL 33134

## New Principal Place of Business:

## Current Mailing Address:

300 ARAGON AVENUE,  
SUITE 210  
CORAL GABLES, FL 33134

## New Mailing Address:

FEI Number: 98-0033423

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GABLES PROFESSIONAL REALTY  
300 ARAGON AVENUE  
SUITE 210  
CORAL GABLES, FL 33134 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: PCD  
Name: PAIZ, GUILLERMO  
Address: 1A AVENIDA 40-70 ZONA 11, MONTE MARIA II  
City-St-Zip: CIUDAD GUATEMALA,

Title: SD  
Name: DE MASSELLI, LUISO F. PAIZ  
Address: 1A AVENIDA 40-70 ZONALL MONTE MARIALL  
City-St-Zip: CIUDAD GUATEMALA,

Title: TD  
Name: BONIFAST, GUILLERMO P  
Address: 1A AVENIDA 40-70 ZONALL MONTE MARIALL  
City-St-Zip: CIUDAD GUATEMALA,

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: GUILLERMO PAIZ

PCD

04/21/2011

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

\_\_\_\_\_  
Date