## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F06000004497

Entity Name: E'KABEL PROJEKTS, CORP.

FILED Jan 03, 2012 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

10739 NW 80TH LN DORAL, FL 33178

Current Mailing Address: New Mailing Address:

10739 NW 80TH LN DORAL, FL 33178

FEI Number: 02-0781994 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ANDRADE-VALENTI, CAROLINA 717 SE 11TH TERRACE CAPE CORAL, FL 33991 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

## **OFFICERS AND DIRECTORS:**

Title: PC

Name: CHIRINOS, ROMER E MR

Address: CALLE MURACHI, QUINTA 503-12-24, MUNICIPIO

City-St-Zip: REPUBLIC OF VENEZUELA, DC XX

Title: VC

Name: RUIZ, CARMEN B MRS

Address: CALLE MURACHI, QUINTA 503-12-24, MUNICIPIO

City-St-Zip: REPUBLIC OF VENEZUELA, DC XX

Title: VP

Name: RUIZ, CARMEN B MRS

Address: CALLE MURACHI, QUINTA 503-12-24, MUNICIPIO

City-St-Zip: REPUBLIC OF VENEZUELA, DC XX

Title:

Name: ROMER, CHIRINOS E MR

Address: CALLE MURACHI, QUINTA 503-12-24, MUNICIPIO

City-St-Zip: REPUBLIC OF VENEZUELA, DC XX

Title:

Name: SANCHEZ, MAYO MRS

Address: CALLE MURACHI, QUINTA 503-12-24, MUNICIPIO

City-St-Zip: REPUBLIC OF VENEZUELA, DC XX

Title:

Name: QUINTAL, DANY MR

Address: CALLE MURACHI, QUINTA 503-12-24, MUNICIPIO

City-St-Zip: REPUBLIC OF VENEZUELA, DC XX

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: ROMER CHIRINOS MR 01/03/2012