## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F11000001370

Entity Name: LEPACHA S.A., INC.

FILED Feb 06, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

801 BRICKELL KWY BLVD APT 2211 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

801 BRICKELL KWY BLVD APT 2211 C/O 355 ALHAMBRA CIRCLE SUITE 801 CORAL GABLES, FL 33134 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

REGISTERED AGENT CORPORATE SERVICES, INC. 355 ALHAMBRA CIRCLE SUITE 801 CORAL GABLES, FL 33134 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: CP

Name: PAOLI, JUAN C

Address: CALLE AUTOCINEMA RES TRIGAL COUNTRY APT424

City-St-Zip: TRIGAL NORTE VALENCIA EDO CA,  $\,$  XX

Title: VCVP

Name: PAOLI DE BENEDETTI, SILVIA T

Address: AVE SAN FELIPE RES LOURDES PH LA CASTELANA

City-St-Zip: CARACAS 1060 VENEZUELA, XX

Title: S

Name: PAOLI DE BENEDETTI, SILVIA T

Address: AVE SAN FELIPE RES LOURDES PH LA CASTELLAN

City-St-Zip: CARACAS 1060 VENEZUELA, XX

Title: DT

Name: DIAZ DE PAOLI, CARMEN T

Address: AVE SAN FELIPE RES LOURDES PH LA CASTELLAN

City-St-Zip: CARACAS 1060 VENEZUELA, 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: JUAN C. PAOLI P 02/06/2012