

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000003366

FILED
Jul 20, 2012
Secretary of State

Entity Name: TECHNICAL AND TRAINING SERVICES, S.A. DE C.V. CORP.

Current Principal Place of Business:

2196 N.W. 89 PLACE
DORAL, F; 33172

New Principal Place of Business:

Current Mailing Address:

PO BOX 520337
MIAMI, FL 33152

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARNIELLA, TULE
2196 N.W. 89 PLACE
DORAL, FL 33152 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: D
Name: RICO, BOSCO ANTONIO
Address: AEROPUERTO INTERNACIONAL EL SALVADOR ACCES
City-St-Zip: SAN LUIS TALPA, LA PAZ, EL SAL, XX XX

Title: D
Name: ALFARO, ROBERTO M
Address: AEROPUERTO INTERNACIONAL EL SALVADOR ACCES
City-St-Zip: SAN LUIS TALPA, LA PAZ, EL SAL, XX XX

Title: P
Name: FERNANDEZ, IGNACIO JOSE
Address: AEROPUERTO INTERNACIONAL EL SALVADOR ACCES
City-St-Zip: SAN LUIS TALPA, LA PAZ, EL SAL, XX XX

Title: S
Name: RAMOS, WALTER ELISEO
Address: AEROPUERTO INTERNACIONAL EL SALVADOR ACCES
City-St-Zip: SAN LUIS TALPA, LA PAZ, EL SAL, XX 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: IGNACIO JOSE FERNANDEZ

P

07/20/2012

Electronic Signature of Signing Officer or Director

Date