

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95121

Entity Name: KARMA BUENO, INC.

FILED  
Feb 15, 2012  
Secretary of State

**Current Principal Place of Business:**

111 NE 1ST STREET,  
5TH FLOOR  
MIAMI, FL 331322501 US

**New Principal Place of Business:**

**Current Mailing Address:**

111 NE 1ST STREET,  
5TH FLOOR  
MIAMI, FL 331322501 US

**New Mailing Address:**

FEI Number: 59-2209192

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MONTIEL DAVIS, MAGDA  
111 NE 1ST STREET  
5TH FLOOR  
MIAMI, FL 331322501 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: PST  
Name: MONTIEL DAVIS, MAGDA  
Address: 111 NE 1ST STREET, 5TH FLOOR  
City-St-Zip: MIAMI, FL 331325201

Title: D  
Name: MONTIEL DAVIS, MAGDA  
Address: 111 NE 1ST STREET, 5TH FLOOR  
City-St-Zip: MIAMI, FL 331322501

Title: VP  
Name: FONTE, KARI A  
Address: 111 NE 1ST STREET, 5TH FLOOR  
City-St-Zip: MIAMI, FL 33132

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: MAGDA MONTIEL DAVIS

PST

02/15/2012

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

\_\_\_\_\_  
Date