

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K86812

FILED
Apr 02, 2009
Secretary of State

Entity Name: COCIBOLCA TRANSFER INCORPORATED

Current Principal Place of Business:

1276 WEST FLAGLER STREET
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

1276 WEST FLAGLER STREET
MIAMI, FL 33135

New Mailing Address:

FEI Number: 65-0125602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTILLO, ARMANDO
1250 SW FLAGLER TERRACE
APT 8
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

CASTILLO, ARMANDO
520 NW 109TH AVENUE
#5
MIAMI, FL 33172 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:

04/02/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: CASTILLO, SILVIO BAYARDO
Address: 1250 SW FLAGLER TERRACE, APT 8
City-St-Zip: MIAMI, FL 33135

Title: P () Delete
Name: CASTILLO, ARMANDO
Address: 1250 SW FLAGLER TERRACE, APT 8
City-St-Zip: MIAMI, FL 33135

Title: DST (X) Delete
Name: CASTILLO, ETHEL KARINA
Address: 1250 SW FLAGLER TERRACE, APT 8
City-St-Zip: MIAMI, FL 33135

Title: D (X) Delete
Name: PEREZ, CYNTHIA
Address: 1272 WEST FLAGLER ST. #206
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: CASTILLO, ISRAEL
Address: 520 NW 109TH AVENUE #5
City-St-Zip: MIAMI, FL 33172

Title: P (X) Change () Addition
Name: CASTILLO, ARMANDO
Address: 520 NW 109TH AVENUE #5
City-St-Zip: MIAMI, FL 33172

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ARMANDO CASTILLO

P

04/02/2009

Electronic Signature of Signing Officer or Director

Date