

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M17022

FILED  
Jan 05, 2011  
Secretary of State

Entity Name: FLORIDA CARRIER, INC.

**Current Principal Place of Business:**

C/O ALEJANDRO A. ACOSTA  
12060 N.W. SOUTH RIVER DRIVE  
MEDLEY, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ALEJANDRO A. ACOSTA  
12060 N.W. SOUTH RIVER DRIVE  
MEDLEY, FL 33178

**New Mailing Address:**

FEI Number: 59-2553790

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ACOSTA, ALEJANDRO A.  
12060 N.W. SOUTH RIVER DRIVE  
MEDLEY, FL 33178 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: DP  
Name: ACOSTA, ALEJANDRO A.  
Address: 12060 NW SOUTH RIVER DR  
City-St-Zip: MEDLEY, FL

Title: V  
Name: ELORTEGUI, MARTA  
Address: 12060 NW SOUTH RIVER DR  
City-St-Zip: MIAMI, FL 33178

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: ALEJANDRO ACOSTA

DP

01/05/2011

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

\_\_\_\_\_  
Date