

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M29486

Entity Name: GENWEST, INC.

FILED  
Feb 14, 2012  
Secretary of State

## Current Principal Place of Business:

C/O THOMAS O WELLS,  
540 BILTMORE WAY  
CORAL GABLES, FL 33134

## New Principal Place of Business:

## Current Mailing Address:

C/O AIFCO, S.A., BAHAMAS FINANCIAL CTR.  
2ND FLR, CHARLOTTE ST, PO BOX CB-13026  
NASSAU, BAHAMAS, NP

## New Mailing Address:

FEI Number: 59-2662760

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THOMAS O. WELLS, P.A.  
540 BILTMORE WAY  
CORAL GABLES, FL 33134 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: DVT  
Name: CLARK, GRAHAM J  
Address: BAHAMAS FINANCIAL CTR, 2ND FL CHARLOTTE ST  
City-St-Zip: NASSAU, NP OC

Title: AS  
Name: WELLS, THOMAS O  
Address: 540 BILTMORE WAY  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: DPS  
Name: FONT, JORDI CARULLA  
Address: BAHAMAS FINANCIAL CENTER 2ND FL CHARLOTT S  
City-St-Zip: NASSAU, BAHAMAS, NP OC

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: GRAHAM CLARK

DVT

02/14/2012

Electronic Signature of Signing Officer or Director

Date