

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000005269

FILED  
Feb 13, 2012  
Secretary of State

**Entity Name:** VETERANOS GUARDIA NACIONAL DE NICARAGUA, INC.

**Current Principal Place of Business:**

8045 SW 107 AV  
EDF 3 APT 212  
MIAMI, FL 33173

**New Principal Place of Business:**

13416 SW 17TH TERRACE CIRCLE SOUTH  
MIAMI, FL 33175

**Current Mailing Address:**

8045 SW 107 AV  
EDF 3 APT 212  
MIAMI, FL 33173

**New Mailing Address:**

13416 SW 17TH TERRACE CIRCLE SOUTH  
MIAMI, FL 33175

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

MOREIRA, ADRIAN  
8045 SW 107 AV  
EDF 3 APT 212  
MIAMI, FL 33173 US

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

SOMARRIBA, AURELIO  
13416 SW 17TH TERRACE CIRCLE SOUTH  
MIAMI, FL 33175 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: SOMARRIBA AURELIO                      02/13/2012  
\_\_\_\_\_  
Electronic Signature of Registered Agent                      Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SOMARRIBA, AURELIO  
Address: 13416 SW 17TH TERRACE CIRCLE SOUTH  
City-St-Zip: MIAMI, FL 33175

Title: VP  
Name: CASTILLO, NOEL  
Address: 12620 SW 184TH STREET  
City-St-Zip: MIAMI, FL 33177

Title: T  
Name: BRAUTIGAN, JERRY  
Address: 12673 SW 146 TERRACE  
City-St-Zip: MIAMI, FL 33186

Title: S  
Name: GARCIA, FERNANDO J  
Address: 14162 SW 62 ST  
City-St-Zip: MIAMI, FL 33183

Title: F  
Name: MÄ¶HRKE, ARTURO  
Address: 1087 SW 135 PL.  
City-St-Zip: MIAMI, FL 33184

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SOMARRIBA AURELIO                      P                      02/13/2012  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director                      Date