

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000004198

FILED
Apr 30, 2012
Secretary of State

Entity Name: ENCUESTRO VISION INTERNACIONAL, INC

Current Principal Place of Business:

532 SW MCCOMB AVE
PORT ST LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

532 SW MCCOMB AVE
PORT ST LUCIE, FL 34953

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'CAMPO, LUCELY
532 SW MCCOMB AVE
PORT ST LUCIE, FL 34953 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: P
Name: O'CAMPO, HECTOR F PASTOR
Address: 532 SW MCCOMB AVE
City-St-Zip: PORT ST LUCIE, FL 34953

Title: VP
Name: O'CAMPO, LUCELY
Address: 532 SW MCCOMB AVE
City-St-Zip: PORT ST LUCIE, FL 34953

Title: T
Name: NAVA, NESTOR PASTOR
Address: 2443 SW CAMEO BLVD
City-St-Zip: PORT ST LUCIE, FL 34953

Title: S
Name: CRADDOCK, ANGELA
Address: 532 SW MCCOMB AVE
City-St-Zip: PORT ST LUCIE, FL 34953

Title: D
Name: CRADDOCK, SHAUN
Address: 532 SW MCCOMB AVE
City-St-Zip: PORT ST LUCIE, FL 34953

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: LUCELY O'CAMPO

VP

04/30/2012

Electronic Signature of Signing Officer or Director

Date