

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000112906

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

**Entity Name:** DADE COUNTY INSTITUTE OF TECHNOLOGY INC.

**Current Principal Place of Business:**

9600 SW 8 STREET  
SUITE 42  
MIAMI, FL 33174 US

**New Principal Place of Business:**

**Current Mailing Address:**

9600 SW 8 STREET  
SUITE 42  
MIAMI, FL 33174 US

**New Mailing Address:**

**FEI Number:** 65-1061842

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LUNA, ROBERTO  
9600 S.W. 8TH. STREET  
SUITE 42  
MIAMI, FL 33174 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: LUNA, ROBERTO  
Address: 9600 S.W. 8TH. STREET, SUITE 42  
City-St-Zip: MIAMI, FL 33174

Title: V  
Name: MATUS, JORGE  
Address: 13932 SW 8 TERRACE  
City-St-Zip: MIAMI, FL 33184

Title: T  
Name: CORDOBA, EDWARD A  
Address: 12851 NW 11TH ST  
City-St-Zip: MIAMI, FL 33182

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: EDWARD A CORDOBA

T

04/14/2011

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

\_\_\_\_\_  
Date