

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000074725

FILED
Oct 05, 2009
Secretary of State**Entity Name:** SANTORINI INVESTMENTS, INC.**Current Principal Place of Business:**600 GRAPETREE DR., UNIT 7F-N
KEY BISCAYNE, FL 33149**New Principal Place of Business:****Current Mailing Address:**600 GRAPETREE DRIVE, UNIT 11BS
KEY BISCAYNE, FL 33149**New Mailing Address:****FEI Number:** 65-1145433**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**JORGE E. OTERO & ASSOCIATES, P.A.
75 VALENCIA AVE., STE. 400
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: PD () Delete
Name: DE LIMA, ERNESTO
Address: 600 GRAPETREE DR., UNIT 7F-N
City-St-Zip: KEY BISCAYNE, FL 33149

Title: S () Delete
Name: DE LIMA BOHMER, ERNESTO
Address: 600 GRAPETREE DR., UNIT 7F-N
City-St-Zip: KEY BISCAYNE, FL 33149

Title: T () Delete
Name: DE LIMA, FERNANDO
Address: 600 GRAPETREE DR., UNIT 7F-N
City-St-Zip: KEY BISCAYNE, FL 33149

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DIR () Change (X) Addition
Name: ANDERSON, ANA ISABEL
Address: 8360 W FLAGLER STREET, SUITE 200
City-St-Zip: MIAMI, FL 33144

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ERNESTO DE LIMA

PD

10/05/2009

Electronic Signature of Signing Officer or Director

Date