

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000088687

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: DUCHINKA INVESTMENTS CORP.

## Current Principal Place of Business:

5201 BLUE LAGOON DR., P.H.  
# 962  
MIAMI, FL 33126 US

## New Principal Place of Business:

3510 EMERALD POINTE DR.  
103-A  
HOLLYWOOD, FL 33021 US

## Current Mailing Address:

3510 EMERALD POINTE DR.  
103-A  
HOLLYWOOD, FL 33021 US

## New Mailing Address:

FEI Number: 98-0379167      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PARADISI, DANIELLA MRS.  
100 BAYVIEW DR.  
# 505  
N. MIAMI BEACH, FL 33160 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PARADISI, HECTOR R SR  
Address: AV. PPAL. LA TAHONA, ED. MIRAVILA. # H402  
City-St-Zip: CARACAS, DM 1061 VE

Title: VP ( ) Delete  
Name: PARADISI, HECTOR J SR  
Address: AV PPAL LA TAHONA ED MIRAVILA # H402  
City-St-Zip: CARACAS, DM 1061 VE

Title: D ( ) Delete  
Name: VARELA, WILFREDO MR  
Address: AV. SANZ, ED. LA PERLA, # 1-A, EL MARQUES  
City-St-Zip: CARACAS, DM 1060 VE

Title: SEC. ( ) Delete  
Name: PARADISI, DANIELLA MRS  
Address: 100 BAYVIEW DR. # 505  
City-St-Zip: N. MIAMI BEACH, FL 33160 US

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

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: HECTOR R PARADISI

SR

04/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date