

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000119688

Entity Name: CAVAS DEL PILAR, INC.

FILED
Apr 16, 2008
Secretary of State

Current Principal Place of Business:

1800 SW 27TH AVE
SUITE 300
MIAMI, FL 33145

New Principal Place of Business:

2501 W 80 ST
SUITE # 9
HIALEAH, FL 33016

Current Mailing Address:

1800 SW 27TH AVE
SUITE 300
MIAMI, FL 33145

New Mailing Address:

2501 W 80 ST
SUITE # 9
HIALEAH, FL 33016

FEI Number: 03-0495775

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORELLI, FRANCISCO
1800 SW 27TH AVE
SUITE 300
MIAMI, FL 33145 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: PD () Delete
Name: ROMERA, NESTOR V
Address: 3625 N. COUNTRY CLUB DR #1107
City-St-Zip: AVENTURA, FL 33180

Title: VPTD () Delete
Name: MORELLI, FRANCISCO
Address: 1800 SW 27TH AVE SUITE 300
City-St-Zip: MIAMI, FL 33145

Title: FDS () Delete
Name: SANTANA, LUIS P
Address: 1800 SW 27TH AVE SUITE 300
City-St-Zip: MIAMI, FL 33145

Title: CD () Delete
Name: GUTIERREZ, HERNAN
Address: 18851 NE 29TH AVE., STE. 900
City-St-Zip: AVENTURA, FL 33180

Title: D (X) Delete
Name: RIEGER, ALEJANDRO
Address: 2010 NE 209 ST
City-St-Zip: MIAMI, FL 33179

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: CD (X) Change () Addition
Name: GUTIERREZ, HERNAN
Address: 8631 NW 193 PL
City-St-Zip: MIAMI, FL 33015

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: MORELLI FRANCISCO

VPTD

04/16/2008

Electronic Signature of Signing Officer or Director

Date