

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000124345

FILED  
Aug 07, 2009  
Secretary of State

Entity Name: SANTA MONICA SALES & CHARTER, INC.

**Current Principal Place of Business:**

AVENUE ISLA VERDE 86  
CAROLINA, PR 00979 PR

**New Principal Place of Business:**

**Current Mailing Address:**

AVENUE ISLA VERDE 86  
CAROLINA, PR 00979 PR

**New Mailing Address:**

FEI Number: 81-0583776

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LAZAR, BRUCE E  
605 LINCOLN RD  
5TH FLOOR  
MIAMI BEACH, FL 33139 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: D ( ) Delete  
Name: MOCHE, GUILLERMO P  
Address: AVENUE ISLA VERDE 86  
City-St-Zip: CAROLINA, PR 00979 PR

Title: ST ( ) Delete  
Name: GRACIA, GONZALO  
Address: AVENUE ISLA VERDE 86  
City-St-Zip: CAROLINA, PR 00979 PR

Title: P ( ) Delete  
Name: ROSARIO, LILLYBETH  
Address: AVENUE ISLA VERDE 86  
City-St-Zip: CAROLINA, PR 00979 PR

**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:

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: GONZALO GRACIA

ST

08/07/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date