2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000130946

KREUTZBERGER, PATRICIO

MIAMI, FL 33131

1221 BRICKELL AVE., STE 1590

Name: Address:

City-St-Zip:

FILED Apr 23, 2009 Secretary of State

Entity Name: ADI INVESTMENT BAYSHORE, INC. **Current Principal Place of Business: New Principal Place of Business:** 1221 BRICKELL AVENUE #1590 MIAMI, FL 33131 **Current Mailing Address: New Mailing Address:** 1221 BRICKELL AVENUE #1590 MIAMI, FL 33131 FEI Number: 90-0114219 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PADRO, JOSE F PADRO, JOSE F 8325 NW 53 ST 2520 NW 97 AVE SUITE 102 SUITE 120 MIAMI, FL 33166 US MIAMI, FL 33172 US 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: 04/23/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: FXVP () Delete Title: () Change () Addition ROSENBLUT, JORGE Name: Name: 1221 BRICKELL AVENUE #1590 Address: Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: Title: STDV Title: () Delete () Change () Addition Name: ONETTO, RAIMUNDO Name: 1221 BRICKELL AVENUE #1590 Address: Address: MIAMI, FL 33131 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition HERNANDEZ, IGNACIO Name: Name: 1221 BRICKELL AVENUE #1590 Address: Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JORGE ROSENBLUT **EXVP** 04/23/2009