

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000141574

FILED  
Feb 16, 2012  
Secretary of State

**Entity Name:** INVERSIONES SAN FRANCISCO DE ASIS, INC.

**Current Principal Place of Business:**

16413 SAPPHIRE BEND  
WESTON, FL 33331 US

**New Principal Place of Business:**

16413 SAPPHIRE BEND  
SUITE 29  
WESTON, FL 33331 US

**Current Mailing Address:**

16413 SAPPHIRE BEND  
SUITE 29  
WESTON, FL 33331 US

**New Mailing Address:**

**FEI Number:** 76-0746494      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

I.T.A. SOLUTIONS, INC.  
4987 N UNIVERSITY DRIVE  
SUITE 29  
LAUDERHILL, FL 33351 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  
Name: PALOMINO, JUAN RAUL  
Address: 16413 SAPPHIRE BEND  
City-St-Zip: WESTON,, FL 33331 US

Title: VD  
Name: MADUENO, ANA  
Address: 16413 SAPPHIRE BEND  
City-St-Zip: WESTON, FL 33331 US

Title: D  
Name: PALOMINO, GIANMARCO  
Address: 16413 SAPPHIRE BEND  
City-St-Zip: WESTON, FL 33331 US

Title: D  
Name: VIDAL, OLINDA  
Address: 16413 SAPPHIRE BEND  
City-St-Zip: WESTON, FL 33331 FL

Title: TD  
Name: MAURICIO, PALOMINO  
Address: 16413 SAPPHIRE BEND  
City-St-Zip: WESTON, FL 33331 FL

I hereby 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 all other like empowered.

SIGNATURE: JUAN RAUL PALOMINO

MR

02/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date