

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000051486

FILED
Apr 03, 2009
Secretary of State

Entity Name: HOTEL INTERNATIONAL SUPPLY, INC

Current Principal Place of Business:

3563 N.W. 82 AVENUE
MIAMI, FL 33122

New Principal Place of Business:

4011 W FLAGLER ST, STE 501
CORAL GABLES, FL 33134

Current Mailing Address:

3563 N.W. 82 AVENUE
MIAMI, FL 33122

New Mailing Address:

4011 W FLAGLER STREET, STE 501
CORAL GABLES, FL 33134

FEI Number: 20-0901146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALCARCE, VICENTE
350 NW 125 AVE
PEMBROKE PINES, FL 33028 US

Name and Address of New Registered Agent:

ARAICA, ANA I
4011 W FLAGLER STREET, STE 501
CORAL GABLES, FL 33134 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: ANA I ARAICA

04/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ACOSTA, SANTIAGO
Address: 350 NW 125 AVE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: SD () Delete
Name: VALCARCE, VICENTE
Address: 350 NW 125 AVE
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ACOSTA, SANTIAGO
Address: 4011 W FLAGLER ST, STE 501
City-St-Zip: CORAL GABLES, FL 33134

Title: VICE (X) Change () Addition
Name: ARAICA, ANA I
Address: 4011 W FLAGLER STREET, STE 501
City-St-Zip: CORAL GABLES, FL 33134

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: SANTIAGO ACOSTA

PRES

04/03/2009

Electronic Signature of Signing Officer or Director

Date