

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007 8:00 am
Secretary of State

03-26-2007 90062 050 ***150.00

DOCUMENT # P04000059948 1. Entity Name PUNTO SUR MANAGEMENT, INC.					
Principal Place of Business 9130 S. DADELAND BLVD. SUITE 1600 MIAMI, FL 33156			Mailing Address 9130 S. DADELAND BLVD. SUITE 1600 MIAMI, FL 33156		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 20-1022610	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GUZMAN & GUZMAN P.A. C/O MARIO GUZMAN 9130 SOUTH DADELAND BLVD STE 1504 MIAMI, FL 33156			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 9130 S. DADELAND BLVD. SUITE 1600 City MIAMI FL Zip Code 33156		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reconstituting)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST ABATIDAGA, NESTOR CARLOS % RJS, 201 S BISCAYNE BLVD, STE 1500 MIAMI, FL 33131		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GILLI, JUAN CARLOS % RJS, 201 S BISCAYNE BLVD, STE 1500 MIAMI, FL 33131		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SIMON, ALEJANDRO C 9130 S. DADELAND BLVD. SUITE 1600 MIAMI, FL 33156		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLOMBETTI, RAUL % RJS, 201 S BISCAYNE BLVD, STE 1500 MIAMI, FL 33131		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TORRE, EDGARDO RUBEN % RJS, 201 S BISCAYNE BLVD, STE 1500 MIAMI, FL 33131		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRUNETTI, NORBEN J 9130 S. DADELAND BLVD. SUITE 1600 MIAMI, FL 33156		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>JUAN CARLOS Gilli - D</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			03.06.07 3056701991 Date Secretary's Phone #		

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