

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000110390

**FILED**  
**Mar 09, 2011**  
**Secretary of State**

**Entity Name:** AURA COOPER DISTRIBUTOR, CORPORATION

**Current Principal Place of Business:**

2073 WEST 62ND STREET  
HIALEAH, FL 33016

**New Principal Place of Business:**

4747 EAST 10TH AVENUE  
HIALEAH, FL 33013

**Current Mailing Address:**

2073 WEST 62ND STREET  
HIALEAH, FL 33016

**New Mailing Address:**

4747 EAST 10TH AVENUE  
HIALEAH, FL 33013

**FEI Number:** 20-1412266

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

TORRES, AURA L  
2073 WEST 62ND STREET  
HIALEAH, FL 33016 US

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

TORRES, AURA L  
4747 EAST 10TH AVENUE  
HIALEAH, FL 33013 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: AURA L TORRES

03/09/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: TORRES, AURA L  
Address: 4747 EAST 10TH AVENUE  
City-St-Zip: HIALEAH, FL 33013

Title: VP  
Name: RAMOS, CUPERTINO  
Address: 4747 EAST 10TH AVENUE  
City-St-Zip: HIALEAH, FL 33013

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: AURA L TORRES

P

03/09/2011

Electronic Signature of Signing Officer or Director

Date