

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000057418

Entity Name: OLIVIA HOUSE, INC.

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

708 SOUTH DIXIE HIGHWAY  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

708 SOUTH DIXIE HIGHWAY  
CORAL GABLES, FL 33146

**New Mailing Address:**

FEI Number: 20-4680735

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

URQUIOLA, JOANNE R  
708 SOUTH DIXIE HIGHWAY  
CORAL GABLES, FL 33146 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: VPTD  
Name: URQUIOLA, JOANNE R  
Address: 6811 PORTILLO STREET  
City-St-Zip: CORAL GABLES, FL 33146 US

Title: PSD  
Name: COBO, ALEIDA  
Address: 8940 SW 61 COURT  
City-St-Zip: PINECREST, FL 33156

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: JOANNE R. URQUIOLA

VP

04/29/2010

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

\_\_\_\_\_  
Date