

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000033230

1. Entity Name  
PROMAVECA CORP



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

10 OCT 12 AM 8:03

Principal Place of Business  
1633 E. VINE STREET  
SUITE 104  
KISSIMMEE, FL 34744

Mailing Address  
1633 E. VINE STREET  
SUITE 104  
KISSIMMEE, FL 34744



2. Principal Place of Business - No P.O. Box #  
1855 Island Walk DR.  
Suite, Apt. #, etc.

3. Mailing Address  
1855 Island Walk DR.  
Suite, Apt. #, etc.

09212010 Chg-P CR2E034 (11/08)

City & State  
Orlando FL

City & State  
Orlando FL

4. FEI Number  
20-4455034

Applied For  
Not Applicable

Zip  
32824

Country  
US

Zip  
32824

Country  
US

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

HERNANDEZ, JUAN C  
1855 ISLAND WALK DRIVE  
KISSIMMEE, FL 34743

## 7. Name and Address of New Registered Agent

Name  
HERNANDEZ, JUAN C.

Street Address (P.O. Box Number is Not Acceptable)

1855 Island Walk Dr.

City  
Orlando

FL Zip Code  
32824

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 reinstating)

DATE

900186591379  
10/12/10--01062--004 \*\*\*400.00

FILE NOW!!! FEE IS \$550.00  
Due by September 24, 2010

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
HERNANDEZ, JUAN C  
1855 ISLAND WALK DRIVE  
ORLANDO, FL 32824 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
RENDO, CARMEN M  
1855 ISLAND WALK DRIVE  
ORLANDO, FL 32824 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☒ Change ☐ Addition  
1855 Island Walk Dr.  
Orlando, FL 32824

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☒ Change ☐ Addition  
1855 Island Walk Dr.  
Orlando, FL 32824

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition  
200181951052  
06/10/10 01026 002 \$150.00

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition  
12 10/13/10

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 or 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/03/10 PROMAVECA@GMAIL.COM

Date Daytime Phone #

OR E-MAIL ADDRESS