

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000035339

FILED  
Jul 28, 2009  
Secretary of State

Entity Name: INMOBILIA REALTY CORPORATION

## Current Principal Place of Business:

36 MAJORCA AVENUE #7  
CORAL GABLES, FL 33134 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 140128  
CORAL GABLES, FL 33114 US

## New Mailing Address:

36 MAJORCA AVENUE #7  
CORAL GABLES, FL 33134 US

FEI Number: 20-4742116

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VELASQUEZ, YORGLLEE J MS  
36 MAJORCA AVENUE #7  
CORAL GABLES, FL 33134 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: VELASQUEZ, YORGLLEE J MS.  
Address: 935 CATALONIA AVE.  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VP ( ) Delete  
Name: GONZALEZ, CARMEN Z MS.  
Address: 935 CATALONIA AVE.  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: S ( ) Delete  
Name: BELLO, EGGLEE  
Address: 935 CATALONIA AVE., #8  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: VELASQUEZ, YORGLLEE J

P

07/28/2009

Electronic Signature of Signing Officer or Director

Date