

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000082425

Entity Name: LOLIA 116 CORP

FILED
Apr 19, 2009
Secretary of State

Current Principal Place of Business:

2775 NE 187 ST
206
AVENTURA, FL 33180 US

New Principal Place of Business:

Current Mailing Address:

2775 NE 187 ST
206
AVENTURA, FL 33180 US

New Mailing Address:

FEI Number: 20-8547862

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARAZI, FABIANA SRA
17600 COLLINGS AV
SUNNY ISLES, FL 33160 US

Name and Address of New Registered Agent:

BENMERGUI, ISAAC ESQ
1045 KANE CONCOURSE
209
BAY HARBOR ISLANDS, FL 33154 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: ISAAC BENMERGUI

04/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ARAZI, MARCOS SR
Address: 2775 NE 187 ST #206
City-St-Zip: AVENTURA, FL 33180 US

Title: VP () Delete
Name: ARAZI, LORENA J SRA
Address: 2775 NE 187 ST #206
City-St-Zip: AVENTURA, FL 33180 US

Title: T () Delete
Name: ARAZI, BETINA SRA
Address: 2775 NE 187 ST #206
City-St-Zip: AVENTURA, FL 33180 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: ARAZI, FABIANA SRA
Address: 2775 NE 187 ST #206
City-St-Zip: AVENTURA, FL 33180 US

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: MARCOS ARAZI

P

04/19/2009

Electronic Signature of Signing Officer or Director

Date