

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000026914

Entity Name: LA FONTANA I, INC.

FILED  
Apr 28, 2009  
Secretary of State

## Current Principal Place of Business:

2999 NE 191ST ST.  
AVENTURA, FL 33180

## New Principal Place of Business:

999 PONCE DE LEON BLVD  
1135  
CORAL GABLES, FL 33134

## Current Mailing Address:

2999 NE 191ST ST.  
AVENTURA, FL 33180

## New Mailing Address:

999 PONCE DE LEON BLVD  
1135  
CORAL GABLES, FL 33134

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANTINI, OLGA  
1000 BRICKELL AVENUE  
SUITE 315  
MIAMI, FL 33131 US

## Name and Address of New Registered Agent:

SANTINI, OLGA  
999 PONCE DE LEON BLVD  
1135  
CORAL GABLES, FL 33134 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: OLGA SANTINI

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: GONZALES, ALBERTO  
Address: 2999 NE 191ST ST.  
City-St-Zip: AVENTURA, FL 33180

Title: D ( ) Delete  
Name: BERNALES, CARLANA  
Address: 2999 NE 191ST ST.  
City-St-Zip: AVENTURA, FL 33180

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: GONZALES, ALBERTO  
Address: 999 PONCE DE LEON BLVD - # 1135  
City-St-Zip: CORAL GABLES, FL 33134

Title: D (X) Change ( ) Addition  
Name: BERNALES, CARLANA  
Address: 999 PONCE DE LEON BLVD - # 1135  
City-St-Zip: CORAL GABLES, FL 33134

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: ALBERTO GONZALEZ

D

04/28/2009

Electronic Signature of Signing Officer or Director

Date