2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000056020

Entity Name: VISTA INTERMEDIA CORP

FILED Apr 16, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2452 BELLEVILLE CT CAPE CORAL, FL 33991 **Current Mailing Address: New Mailing Address:** 2452 BELLEVILLE CT CAPE CORAL, FL 33991 FEI Number: 20-8992211 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: ALSINA, CESAR ALSINA, CESAR 2211 WILSON BLVD NORTH 11308 BONITA BEACH ROAD 401 SUITE 101 BONITA SPRINGS, FL 34135 US BONITA SPRINGS, FL 34135 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: 04/16/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (X). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition PAEZ, JUAN C Name: Name: 2452 BELLEVILLE CT Address: Address: City-St-Zip: CAPE CORAL, FL 33991 City-St-Zip: VΡ Title: VΡ Title: () Delete (X) Change () Addition Name: PAEZ. BIBIANA Name: PAEZ. BIBIANA 17561 BRICKSTONE LOOP 2452 BELLEVILLE CT Address: Address: CAPE CORAL, FL 33991 City-St-Zip: CAPE CORAL, FL 33991 City-St-Zip: Title: CFO () Delete Title: () Change () Addition CAICEDO, LUIS A Name: Name: 2452 BELLEVILLE CT Address: Address: City-St-Zip: CAPE CORAL, FL 33991 City-St-Zip: Title: () Delete Title: () Change () Addition ROJAS, EDUARDO Name: Name: Address: 2452 BELLEVILLE CT Address: City-St-Zip: CAPE CORAL, FL 33991 City-St-Zip: Title: Title: () Delete () Change () Addition LUZ, CAICEDO M Name: Name: 2452 BELLEVILLE CT Address: Address:

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.

City-St-Zip:

SIGNATURE: JUAN C. PAEZ P 04/16/2008

City-St-Zip:

CAPE CORAL, FL 33991