

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000084363

Entity Name: LATINO POKER TOUR INC.

**FILED**  
**Feb 01, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1400 NW 107 AVE  
SUITE 211  
DORAL, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

1400 NW 107 AVE  
SUITE 211  
DORAL, FL 33172

**New Mailing Address:**

FEI Number: 26-2317208

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JULIO, ACOSTA CPA  
6970 TAFT STREET  
HOLLYWOOD, FL 33024 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RIVERON, WILLIAM  
Address: 5815 SW 27TH STREET  
City-St-Zip: MIAMI, FL 33155

Title: VP  
Name: SCHIFFMAN, ZACHARY A  
Address: 8260 NW 27 STREET  
City-St-Zip: MIAMI, FL 33122

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM RIVERON

P

02/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date