

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000108292

Entity Name: NEW PROJECT LATIN INC

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2731 CULLENS CT  
OCOE, FL 34761 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 849  
OCOE, FL 34761 US

**New Mailing Address:**

FEI Number: 26-1171222      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BANOS CUELLAR, JORGE A  
1217 SAND PINE DR  
OCOE, FL 34761 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: BANOS CUELLAR, JORGE A  
Address: 1217 SAND PINE DR  
City-St-Zip: OCOE, FL 34761 US

Title: VP  
Name: BANOS, JORGE  
Address: 1217 SAND PINE DR  
City-St-Zip: OCOE, FL 34761 US

Title: T  
Name: BANOS, JOSE L  
Address: 1217 SAND PINE DR  
City-St-Zip: OCOE, FL 34761 US

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: JORGE BANOS CUELLAR

PD

05/01/2012

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

\_\_\_\_\_  
Date