## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000131995

Entity Name: PROANDRE HYGIENE SYSTEMS, INC.

FILED Apr 14, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2655 LE JEUNE ROAD 9460 NW 12 STREET

SUITE 409 SUITE 201

CORAL GABLES, FL 33134 CORAL GABLES, FL 33172

Current Mailing Address: New Mailing Address:

2655 LE JEUNE ROAD 9460 NW 12 STREET

SUITE 409 SUITE 201 CORAL GABLES, FL 33134 MIAMI, FL 33172

Will Will, 12 33172

FEI Number: 39-2070205 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TORRENTS, JORDI R
2655 LE JEUNE ROAD
SUITE 409
CORAL GABLES, FL 33134 US
TORRENTS, JORDI R
9460 NW 12 STREET
SUITE 201
MIAMI, FL 33172 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: 04/14/2010

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: DP

Name: CEREZALEZ, ENRIQUE MR

Address: CAMI CAN RABASSA 20 SANT ANDREU DE LLAVANE

City-St-Zip: BARCELONA, BC SPAIN SP

Title: DS

Name: SUAREZ, MANUEL MR

Address: AVDA. CAN VOLART 7 08445 CANNOVES I SAMALU

City-St-Zip: BARCELONA, BC SPAIN SP

Title: T D

Name: PUIG, QUERALT MS

Address: 9460 NW 12 STREET SUITE 201

City-St-Zip: MIAMI, FL 33172 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: QUERALT PUIG TD 04/14/2010