2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000135337

Entity Name: INVERSIONES YOLANDA, INC.

FILED Feb 20, 2009 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
10000 NW 25TH STREET MCO: 1131 UNIT 1Q DORAL, FL 33172					
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
11904 MIRAMAR PKWY MIRAMAR, FL 33025					
FEI Number:		FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Reg				of New Registered Agent:	
MONTIEL, YOLANDA 10000 NW 25TH STREET MCO: 1131 UNIT 1Q DORAL, 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:					
		Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	MONTIEL, YOLAN	STREET , MCO: 1131 UNIT 1Q	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HERNANDEZ, CA	STREET , MCO: 1131 UNIT 1Q	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HERNANDEZ, GA	STREET , MCO: 1131 UNIT 1Q	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D HERNANDEZ, JO 10000 NW 25TH DORAL, FL 3317	RGE STREET , MCO: 1131 UNIT 1Q	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HERNANDEZ, ÁLI	STREET , MCO: 1131 UNIT 1Q	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HERNANDEZ, MA	STREET , MCO: 1131 UNIT 1Q	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MONTIEL YOLANDA P 02/20/2009