

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000061702

Entity Name: ORDONEZ INC.

**FILED**  
**Mar 28, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

8501 SW 54 CT  
MIAMI, FL 33143

## **New Principal Place of Business:**

1550 S DIXIE HWY  
#203  
CORAL GABLES, FL 33146

## **Current Mailing Address:**

8501 SW 54 CT  
MIAMI, FL 33143

## **New Mailing Address:**

1550 S DIXIE HWY  
#203  
CORAL GABLES, FL 33146

FEI Number: 26-3954404

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ORDONEZ, ALVARO J  
8501 SW 54 CT  
MIAMI, FL 33143 US

## **Name and Address of New Registered Agent:**

ORDONEZ, ALVARO J  
1550 S DIXIE HWY  
#203  
CORAL GABLES, FL 33146 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:

03/28/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: P  
Name: ORDONEZ, ALVARO J  
Address: 1550 S DIXIE HWY # 203  
City-St-Zip: CORAL GABLES, FL 33146

Title: VP  
Name: RESTREPO, MARTHA C  
Address: 1550 S DIXIE HWY # 203  
City-St-Zip: CORAL GABLES, FL 33146

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: MARTHA RESTREPO

MRS

03/28/2011

Electronic Signature of Signing Officer or Director

Date