

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000074760

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

**Entity Name:** TORO INVESTMENT & HOLDINGS INC.

**Current Principal Place of Business:**

18356 NW 68TH AVE #K  
MIAMI, FL 33015

**New Principal Place of Business:**

**Current Mailing Address:**

18356 NW 68TH AVE #K  
MIAMI, FL 33015

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

THOMAS, ZAMANI ESQ.  
18356 NW 68TH AVE #K  
MIAMI, FL 33015 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: CEO  
Name: THOMAS, ZAMANI ESQ.  
Address: 18356 NW 68TH AVE #K  
City-St-Zip: MIAMI, FL 33015

Title: CFO  
Name: SIMONS, PETER  
Address: 5 MARINA PARADE UNIT 713  
City-St-Zip: TORONTO ON, CANADA M8V 4B4,

Title: CFO  
Name: SIMONS, PETER  
Address: 5 MARINA PARADE UNIT 713  
City-St-Zip: TORONTO ON, CANADA M8V 4B4,

Title: S  
Name: PITT, SHELDON HEQ.  
Address: 76 AUBURN AVE.  
City-St-Zip: TORONTO ONT. M6H2T9,

Title: D  
Name: THOMAS, DIN  
Address: 18356 NW 68TH AVE #K  
City-St-Zip: MIAMI, FL 33015

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: ZAMANI THOMAS

MGR

05/01/2012

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

\_\_\_\_\_  
Date