

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000077000

Entity Name: ORCHID WORLD, INC.

FILED  
May 01, 2012  
Secretary of State

## Current Principal Place of Business:

325 S. BISCAYNE BLVD.  
2618  
MIAMI, FL 33131

## New Principal Place of Business:

## Current Mailing Address:

325 S. BISCAYNE BLVD.  
2618  
MIAMI, FL 33131

## New Mailing Address:

FEI Number: 94-3447429

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAMIREZ, SAMIRA  
325 S. BISCAYNE BLVD.  
2618  
MIAMI, FL 33131 US

## Name and Address of New Registered Agent:

MED ACCOUNTING SERVICES LLC  
4468 DOGWOOD CIRCLE  
WESTON, FL 33331 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: MARIA EUGENIA DIAZ

05/01/2012

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P  
Name: RAMIREZ, SAMIRA  
Address: 325 S. BISCAYNE BLVD. # 2618  
City-St-Zip: MIAMI, FL 33131

Title: VP  
Name: RAMIREZ, MIGUEL ANGEL  
Address: 325 S. BISCAYNE BLVD. # 2618  
City-St-Zip: MIAMI, FL 33131

Title: S  
Name: ACOSTA, ADALGISA  
Address: 325 S. BISCAYNE BLVD. # 2618  
City-St-Zip: MIAMI, FL 33131

Title: T  
Name: RAMIREZ, MIGUEL DARIO  
Address: 325 S. BISCAYNE BLVD. # 2618  
City-St-Zip: MIAMI, FL 33131

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: SAMIRA RAMIREZ

P

05/01/2012

Electronic Signature of Signing Officer or Director

Date