

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000086314

Entity Name: VIENCO, CORP.

FILED
Jun 30, 2009
Secretary of State

Current Principal Place of Business:

10520 NW 26TH ST. STE C-101
DORAL, FL 33172

New Principal Place of Business:

Current Mailing Address:

10520 NW 26TH ST. STE C-101
DORAL, FL 33172

New Mailing Address:

FEI Number: 26-3746938

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTERO, JULIAN F ESQ.
18851 NE 29TH AVE, STE 900
AVENTURA, FL 33180 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CASTRILLON, ANDRES D
Address: 10520 NW 26TH ST. STE C-101
City-St-Zip: DORAL, FL 33172

Title: DV () Delete
Name: STIFEL, CLAUDIO
Address: AV. PROVIDENCIA 2083, PISO 3
City-St-Zip: SANTIAGO, CHILE,

Title: D () Delete
Name: BOBADILLA, ROBERTO
Address: AV. PROVIDENCIA 2083, PISO 3
City-St-Zip: SANTIAGO, CHILE,

Title: D () Delete
Name: ARANZUEQUE, HECTOR
Address: AV. PROVIDENCIA 2083, PISO 3
City-St-Zip: SANTIAGO, CHILE,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MBR (X) Change () Addition
Name: CASTRILLON, ANDRES D
Address: 10520 NW 26TH ST. STE C-101
City-St-Zip: DORAL, FL 33172 US

Title: MBR (X) Change () Addition
Name: STIFEL, CLAUDIO
Address: AV. PROVIDENCIA 2083, PISO 3
City-St-Zip: SANTIAGO, CHILE, SA 1 CL

Title: D (X) Change () Addition
Name: BOBADILLA, ROBERTO
Address: AV. PROVIDENCIA 2083, PISO 3
City-St-Zip: SANTIAGO, CHILE, SA 1 CL

Title: D (X) Change () Addition
Name: ARANZUEQUE, HECTOR
Address: AV. PROVIDENCIA 2083, PISO 3
City-St-Zip: SANTIAGO, CHILE, SA 1 CL

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: ANDRES D. CASTRILLON

MBR

06/30/2009

Electronic Signature of Signing Officer or Director

Date