

## **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P09000088696

Entity Name: CASAIDEAS HOLDINGS, INC.

**FILED**  
**Sep 15, 2010**  
**Secretary of State**

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

C/O RAFAEL A. AGUILAR, ESQ.  
ONE SE THIRD AVENUE, 25TH FLOOR  
MIAMI, FL 33131

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

SHOPS AT SUNSET PLACE  
5701 SUNSET DRIVE, SUITE 150  
SOUTH MIAMI, FL 33143 US

### **Current Mailing Address:**

C/O RAFAEL A. AGUILAR, ESQ.  
ONE SE THIRD AVENUE, 25TH FLOOR  
MIAMI, FL 33131

### **New Mailing Address:**

SHOPS AT SUNSET PLACE  
5701 SUNSET DRIVE, SUITE 150  
SOUTH MIAMI, FL 33143 US

FEI Number: 46-0523743

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPDIRECT AGENTS, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 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: DPST  
Name: GOMEZ, GUSTAVO  
Address: MANUEL ANTONIO TOCORNAL 356  
City-St-Zip: SANTIAGO, CH

Title: CFO  
Name: GABOR, RODRIGO  
Address: MANUEL ANTONIO TOCORNAL 356  
City-St-Zip: SANTIAGO, CH

Title: IBM  
Name: MORA, DIEGO  
Address: MANUEL ANTONIO TOCORNAL 356  
City-St-Zip: SANTIAGO, CH

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: GOMEZ, GUSTAVO

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09/15/2010

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

\_\_\_\_\_  
Date