

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000011020

**FILED**  
**May 13, 2011**  
**Secretary of State**

**Entity Name:** COMERCIALIZADORA LGT OF AMERICA INC.

**Current Principal Place of Business:**

218 SE 14 STREET, UNIT 2105  
MIAMI, FL 33131

**New Principal Place of Business:**

501 BRICKELL KEY DRIVE  
SUITE 504  
MIAMI, FL 33131

**Current Mailing Address:**

218 SE 14 STREET, UNIT 2105  
MIAMI, FL 33131

**New Mailing Address:**

501 BRICKELL KEY DRIVE  
SUITE 504  
MIAMI, FL 33131

**FEI Number:** 68-0680164

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MARTINEZ-CID, RICARDO  
1699 CORAL WAY, SUITE 510  
MIAMI, FL 33145 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: PVD  
Name: BELLO LUY, JOSE L  
Address: 501 BRICKELL KEY DRIVE, SUITE 504  
City-St-Zip: MIAMI, FL 33131

Title: STD  
Name: BELLO LUY, MARIAN D  
Address: 501 BRICKELL KEY DRIVE, SUITE 504  
City-St-Zip: MIAMI, FL 33131

Title: VD  
Name: BELLO LUY, PEDRO  
Address: 501 BRICKELL KEY DRIVE  
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: MARIAN BELLO LUY

STD

05/13/2011

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

\_\_\_\_\_  
Date