

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000025774

Entity Name: ILLIOSCO CORP.

FILED  
Mar 23, 2012  
Secretary of State

**Current Principal Place of Business:**

200 SUNNY ISLES BLVD #1606  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

2829 BIRD AVE SUITE 5  
MIAMI, FL 33133

**New Mailing Address:**

FEI Number: 68-0682327

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ARAZOZA & FERNANDEZ-FRAGA P.A.  
2100 SALZEDO ST SUITE 300  
CORAL GABLES, FL 33134 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: D  
Name: BARE, JACK  
Address: 200 SUNNY ISLES BLVD #1606  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: PS  
Name: BARE, CLARA  
Address: 200 SUNNY ISLES BLVD #1606  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VPD  
Name: BARE, FRANCOIS  
Address: 200 SUNNY ISLES BLVD #1606  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: FRANCOIS BARE

VPD

03/23/2012

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

\_\_\_\_\_ Date