

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000034231

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** INSULAN CORPORATION

**Current Principal Place of Business:**

1110 BRICKELL AVE STE 300  
MIAMI, FL 33131

**New Principal Place of Business:**

1110 BRICKELL AVE STE 505  
MIAMI, FL 33131

**Current Mailing Address:**

1110 BRICKELL AVE STE 300  
MIAMI, FL 33131

**New Mailing Address:**

1110 BRICKELL AVE STE 505  
MIAMI, FL 33131

**FEI Number:** 27-2408641

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CASTIGLIONE, MELQUIOR  
1110 BRICKELL AVE STE 300  
MIAMI, FL 33131 US

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

CASTIGLIONE, MELQUIOR  
1110 BRICKELL AVE STE 505  
MIAMI, FL 33131 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:

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: CASTIGLIONE, MELQUIOR  
Address: 1110 BRICKELL AVE STE 505  
City-St-Zip: MIAMI, FL 33131

Title: DS  
Name: CASTIGLIONE, DAVID  
Address: 1110 BRICKELL AVE STE 505  
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: MELQUIOR CASTIGLIONE

P

04/30/2012

Electronic Signature of Signing Officer or Director

Date