

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000074488

**FILED**  
**Mar 08, 2012**  
**Secretary of State**

**Entity Name:** DISTRIBUIDORA FERLE C. A. CORP

**Current Principal Place of Business:**

1422 EAST MAWRY DRIVE  
106  
HOMESTEAD, FL 33033 US

**New Principal Place of Business:**

**Current Mailing Address:**

1422 EAST MAWRY DRIVE  
106  
HOMESTEAD, FL 33033 US

**New Mailing Address:**

**FEI Number:** 27-3431323      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

URIBE, LEILA  
1422 EAST MAWRY DRIVE  
106  
HOMESTEAD, FL 33033 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:** P  
**Name:** URIBE, LEILA  
**Address:** 1422 EAST MAWRY DRIVE  
**City-St-Zip:** HOMESTEAD, FL 33033 US

**Title:** VP  
**Name:** FERNANDO, NAVAS URIBE  
**Address:** C. ABOGADOS, QUINTA FLOGLAMARE  
**City-St-Zip:** CARACAS, DF 00000 VE

**Title:** DIR  
**Name:** HECTOR, NAVAS URIBE  
**Address:** 1422 EAST MAWRY DRIVE  
**City-St-Zip:** HOMESTEAD, FL 33033 US

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: LEILA URIBE

P

03/08/2012

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

\_\_\_\_\_ Date