

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000082819

Entity Name: DORTA SOLUTIONS, INC.

FILED  
Jan 16, 2012  
Secretary of State

**Current Principal Place of Business:**

232 ZAMORA AVE.  
APT. 4  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

232 ZAMORA AVE.  
APT. 4  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

FEI Number: 27-3665009      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BOLIVAR, DANNY  
232 ZAMORA AVE.  
APT. 4  
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: P,T  
Name: VIVAS, TADEO  
Address: 232 ZAMORA AVE., SUITE 4  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: D  
Name: VIVAS, TADEO  
Address: 232 ZAMORA AVE., SUITE 4  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: S,D  
Name: BOLIVAR, DANNY  
Address: 232 ZAMORA AVE., SUITE 4  
City-St-Zip: CORAL GABLES, FL 33134 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: TADEO VIVAS

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

MR.

01/16/2012

\_\_\_\_\_ Date