

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000090301

**FILED**  
**Sep 09, 2011**  
**Secretary of State**

**Entity Name:** ARAYA MANAGEMENT AND MULTI SERVICES INC.

**Current Principal Place of Business:**

400 NW 52 ST  
MIAMI, FL 33127

**New Principal Place of Business:**

**Current Mailing Address:**

400 NW 52 ST  
MIAMI, FL 33127

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

SAINTE ROSE, BRIAN  
8421 NW 10TH ST  
PLANTATION, FL 33322      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: PLACIDE, ALBERT  
Address: 750 NW 129 ST  
City-St-Zip: MIAMI, FL 33168

Title: S  
Name: PLACIDE, ALBERT  
Address: 750 NW 129 ST  
City-St-Zip: MIAMI, FL 33168

Title: V  
Name: LAGUERRE, CARMIN G  
Address: 400 NW 52 ST  
City-St-Zip: MIAMI, FL 33127

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: CARMIN LAGUERRE

V

09/09/2011

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

\_\_\_\_\_  
Date