

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000098924

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Entity Name:** DROPHYS INVESTMENTS CORPORATION

**Current Principal Place of Business:**

6010 NW 99 AVENUE  
104  
DORAL, FL 33178

**New Principal Place of Business:**

6010 NW 99 AVENUE  
104  
DORAL, FL 33178 US

**Current Mailing Address:**

6010 NW 99 AVENUE  
104  
DORAL, FL 33178

**New Mailing Address:**

**FEI Number:** 24-4217311      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ABDUL MASSIH, JAVIER H  
6741 NW 107 CT  
DORAL, FL 33178 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: VP  
Name: ABDUL MASSIH, JAVIER A  
Address: 6741 NW 107 CT  
City-St-Zip: DORAL, FL 33178

Title: P  
Name: MOUKHALLALEH, DALAL  
Address: 6741 NW 107 CT  
City-St-Zip: DORAL, FL 33178

Title: VP  
Name: DISTRIBUIDORA DROPHY'S S.A.  
Address: AV FRANCISCO DE LORETO LOCAL 4703  
City-St-Zip: LA VICTORIA, AR 2121 VE

Title: S  
Name: ABDUL MASSIH, JAVIER  
Address: 6741 NW 107 CT  
City-St-Zip: DORAL, FL 33178

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: JAVIER ABDUL

PD

04/23/2012

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

\_\_\_\_\_  
Date