

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000100610

Entity Name: CIGE CORPORATION

**FILED**  
**Mar 03, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

16338 SW 2ND DRIVE  
PEMBROKE PINES, FL 33027

**New Principal Place of Business:**

**Current Mailing Address:**

16338 SW 2ND DRIVE  
PEMBROKE PINES, FL 33027

**New Mailing Address:**

FEI Number: 27-4295226

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CABANAS, JOSEPH F  
CABANAS & ASSOCIATES, P.A.  
10520 N.W. 26TH ST., C-201  
DORAL, FL 33172 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: DPST  
Name: CASTELLANOS, CARLOS H  
Address: 16338 SW 2ND DRIVE  
City-St-Zip: PEMBROKE PINES, FL 33027

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: CARLOS CASTELLANOS

PRES

03/03/2011

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

\_\_\_\_\_  
Date