

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000048804

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

**Entity Name:** INVERSIONES VAL CORP

**Current Principal Place of Business:**

6135 NW 167 ST SUITE E-18  
MIAMI LAKES, FL 33015

**New Principal Place of Business:**

6135 NW 167 STREET  
SUITE E-18  
MIAMI LAKES, FL 33015 US

**Current Mailing Address:**

6135 NW 167 ST SUITE E-18  
MIAMI LAKES, FL 33015

**New Mailing Address:**

6135 NW 167 STREET  
SUITE E-18  
MIAMI LAKES, FL 33015 US

**FEI Number:** 37-1640108

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CASTELLANO, OSCAR J  
6135 NW 167 ST SUITE E-18  
MIAMI LAKES, FL 33015 US

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

CASTELLANO, OSCAR J  
6135 NW 167 STREET  
SUITE E-18  
MIAMI LAKES, FL 33015 US

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:** OSCAR J CASTELLANO

03/23/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PSTD  
**Name:** CASTELLANO, OSCAR J  
**Address:** 6135 NW 167 STREET, SUITE E-18  
**City-St-Zip:** MIAMI LAKES, FL 33015 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:** OSCAR J CASTELLANO

PSTD

03/23/2012

Electronic Signature of Signing Officer or Director

Date