

2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Dec 12, 2012
Secretary of State**

DOCUMENT# P11000078495

Entity Name: 401 ALHAMBRA, INC.

Current Principal Place of Business:

8930 WEST FLAGLER STREET
APT 105
MIAMI, FL 33174

New Principal Place of Business:

Current Mailing Address:

8930 WEST FLAGLER STREET
APT 105
MIAMI, FL 33174

New Mailing Address:

FEI Number: 32-0353980 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INES, AZPURUA MRS.
8930 WEST FLAGLER
APT 105
MIAMI, FL 33174 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: D
Name: LARA, FRANCES TERESA MS
Address: 8930 WEST FLAGLER STREET
City-St-Zip: MIAMI, FL 331174

Title: P/D
Name: LARA AREVALO, ENRIQUE B MR
Address: 8930 WEST FLAGLER STREET, APT 105
City-St-Zip: MIAMI, FL 33174

Title: D
Name: LARA AREVALO, JUAN ANDRES MR.
Address: 8930 WEST FLAGLER STREET, APT 105
City-St-Zip: MIAMI, FL 33174

Title: D
Name: LARA DE JARAMILLO, MARIA TERESA MRS
Address: 8930 WEST FLAGLER APT 105
City-St-Zip: MIAMI, FL 33174

Title: D
Name: LARA DE BELLOSO, MARIA V
Address: 8930 WEST FLAGLER APT 105
City-St-Zip: MIAMI, FL 33174

Title: D
Name: AZPURUA, INES MRS
Address: 8930 WEST FLAGLER, APT 105
City-St-Zip: MIAMI, FL 33174

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: ENRIQUE B LARA AREVALO

P

12/12/2012

Electronic Signature of Signing Officer or Director

Date