

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000025252

**Entity Name:** INTERMAR CARIBE, INC.

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

16880 NE 19 AVE  
N MIAMI BEACH, FL 33162 US

**New Principal Place of Business:**

**Current Mailing Address:**

16880 NE 19 AVE  
N MIAMI BEACH, FL 33162 US

**New Mailing Address:**

**FEI Number:** 65-0395434

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FORCINO, SILVIA  
16880 NE 19 AVE  
N MIAMI BEACH, FL 33162 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: FORCINO, SILVIA  
Address: 16880 NE 19 AVE  
City-St-Zip: N MIAMI BEACH, FL 33162

Title: D  
Name: FORCINO, NORBERTO  
Address: 16880 NE 19 AVE  
City-St-Zip: N MIAMI BEACH, FL 33162

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: SILVIA FORCINO

PRES

03/15/2011

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

\_\_\_\_\_  
Date