

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000096763

FILED  
Apr 30, 2012  
Secretary of State

Entity Name: BIONNE, INC.

**Current Principal Place of Business:**

9400 OLD CUTLER LANE  
CORAL GABLES, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

C/O FREDERICK J. WILSON III, ESQ.  
4951 SW 80 STREET  
MIAMI, FL 33143

**New Mailing Address:**

FEI Number: 65-0682038      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WILSON, FREDERICK J III,ESQ  
4951 SW 80 STREET  
MIAMI, FL 33143      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: DP  
Name: DEL ROSAL, JORGE L  
Address: 9400 OLD CUTLER LANE  
City-St-Zip: CORAL GABLES, FL 33156

Title: DP  
Name: DEL ROSAL, ZOILA C  
Address: 9400 OLD CUTLER LANE  
City-St-Zip: CORAL GABLES, FL 33156

Title: DTS  
Name: DEL ROSAL, JORGE JR  
Address: 9400 OLD CUTLER LANE  
City-St-Zip: CORAL GABLES, FL 33156

Title: DP  
Name: DEL ROSAL CABRERA, VIRGINIA  
Address: 9400 OLD CUTLER LANE  
City-St-Zip: CORAL GABLES, FL 33156

Title: DP  
Name: DEL ROSAL WILSON, ELENA  
Address: 9400 OLD CUTLER LANE  
City-St-Zip: CORAL GABLES, FL 33156

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: ELENA DEL ROSAL WILSON

DP

04/30/2012

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

\_\_\_\_\_  
Date