

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000048247

FILED
May 01, 2009
Secretary of State

Entity Name: CORPORACION JULIA U.S.A.

Current Principal Place of Business:

2223 SW 13 AV
302
MIAMI, FL 33145 US

Current Mailing Address:

2223 SW 13 AV
302
MIAMI, FL 33145 US

New Principal Place of Business:

1680 CORAL WAY
302
MIAMI, FL 33145 US

New Mailing Address:

1680 CORAL WAY
302
MIAMI, FL 33145 US

FEI Number: 65-0843254

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMPLETE CORPORATE SERVICE, INC
2223 SW 13 AV
302
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

COMPLETE CORPORATE SERVICE, INC
1680 CORAL WAY
302
MIAMI, FL 33145 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: A. BALLESTAS, PRES.

05/01/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: GONZALEZ, FABIAN
Address: 2223 SW 13 AV
City-St-Zip: MIAMI, FL 33145

Title: DV () Delete
Name: GONZALEZ, JULIA DE
Address: 2223 SW 13 AV
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: GONZALEZ, FABIAN
Address: 1680 CORAL WAY
City-St-Zip: MIAMI, FL 33145

Title: DV (X) Change () Addition
Name: GONZALEZ, JULIA DE
Address: 1680 CORAL WAY
City-St-Zip: MIAMI, FL 33145

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: FABIAN GONZALEZ

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05/01/2009

Electronic Signature of Signing Officer or Director

Date