

2005 FOR PROFIT CORPORATION ANNUAL REPORT

APPROVED
AND
FILED

05 APR 19 PM 12:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000042969

1. Entity Name
DILUAN INVESTMENT CORPORATION



Principal Place of Business
1390 BRICKELL AVENUE
SUITE 200
MIAMI, FL 33131

Mailing Address
1390 BRICKELL AVENUE
SUITE 200
MIAMI, FL 33131



04182005 Chg-P CR2E034 (10/03) *MRB*

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
65-0919117

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CASTILLO, ALVARO B P. A.
1390 BRICKELL AVENUE
SUITE 200
MIAMI, FL 33131

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-18-05

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VPD ☐ Delete
NAME DE HOFFMANN, HUGO ANSELMO
STREET ADDRESS 1390 BRICKELL AVENUE SUITE 200
CITY-ST-ZIP MIAMI, FL 33131

☐ Change ☐ Addition
500054006555
05/06/05--01050--026 **150.00

TITLE PT ☐ Delete
NAME DE HOFFMANN, SEBASTIAN D
STREET ADDRESS 1390 BRICKELL AVENUE, STE 200
CITY-ST-ZIP MIAMI, FL 33131

☐ Change ☐ Addition

TITLE S ☐ Delete
NAME FLEISCHHEKER, CINTHYA M
STREET ADDRESS 1390 BRICKELL AVENUE, STE 200
CITY-ST-ZIP MIAMI, FL 33131

☐ Change ☐ Addition
500054006555
05/06/05--01050--027 **8.75

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Change ☒ Addition
NAME Alvaro Castillo
STREET ADDRESS 1390 Brickell Avenue, Suite 200
CITY-ST-ZIP Miami, FL 33131

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A. Castillo

Date

Daytime Phone #

4-18-05 305 371-5540