2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P99000082138

1. Entity Name
PALMAREJO CORP.

FILED
Feb 08, 2007 8:00 am
Secretary of State
02-08-2007 90056 049 ***150.00

Principal Place of Business
420 ISLAND DR.
KEY BISCAYNE FL 33149

Mailing Address
420 ISLAND DR.
KEY BISCAYNE FL 33149

2. Principal Place of Business - No P.O. Box #
2101 Brickell Avenue
Suite, Apt. #, etc.
1507
City & State
Miami
Zip
33129
Country
Dade.

3. Mailing Address
2101 Brickell Avenue
Suite, Apt. #, etc.
1507
City & State
Miami
Zip
Fl
Country
33129

1st MOORE CR2E034 (10/06)

4. FEI Number 65-0950305 | Applied For | Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PIEDRA, AURELIO
780 NW 42 AVENUE
SUITE 516
MIAMI FL 33126

7. Name and Address of New Registered Agent

Name Vargas, Piedra & Company -
Street Address (P.O. Box Number is Not Acceptable) 9100 South Dadeland Blvd. Suite 912
City Miami FL Zip Code 33156

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 Julieta E de Rincon 1/31/2007
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee Will Be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	PTD	☐ Delete
NAME	RINCON, JULIETA E	
STREET ADDRESS	420 ISLAND DR.	
CITY-ST-ZIP	KEY BISCAYNE FL 33149	
TITLE	VP	☐ Delete
NAME	RINCON, VALERIO F	
STREET ADDRESS	420 ISLAND DR.	
CITY-ST-ZIP	KEY BISCAYNE FL 33149	
TITLE	D	☐ Delete
NAME	RINCON DE ZYBERMAN , ALBA	
STREET ADDRESS	420 ISLAND DR.	
CITY-ST-ZIP	KEY BISCAYNE FL 33149	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☒ Change ☐ Addition
NAME	Rincon Julieta	
STREET ADDRESS	2101 Brickell Avenue - Apt 1507	
CITY-ST-ZIP	Miami, Fl 33129	
TITLE	VP	☒ Change ☐ Addition
NAME	Rincon Valerio	
STREET ADDRESS	2101 Brickell Ave - Apt 1507	
CITY-ST-ZIP	Miami, Fl 33129	
TITLE		☒ Change ☐ Addition
NAME	Rincon Zylberman Alba	
STREET ADDRESS	2101 Brickell Ave. Apt 1507	
CITY-ST-ZIP	Miami, Fl 33129	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Julieta E de Rincon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #