2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V27360

FILED Apr 16, 2007 Secretary of State

Entity Name: INDEMNE INMUEBLE S.A. CORPORATION

Current P	rincipal Plac	e of Business:	New Principal Plac	ce of Business:
	ND & KNIGHT KELL AVE SI 33131			
Current M	lailing Addre	ess:	New Mailing Addre	ess:
	ND & KNIGHT KELL AVE SI 33131			
FEI Number	: 65-0425302	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of	Current Registered Agent:	Name and Address	s of New Registered Agent:
	KELL AVE SU			
	named entity	submits this statement for the	purpose of changing its registe	ered office or registered agent, or both
	e of Florida.			
	e of Florida.			
n the State	e of Florida. RE:	onic Signature of Registered A	gent	Date
in the State	e of Florida. RE: Electro	onic Signature of Registered Aquering Trust Fund Contribution ().	gent	Date
in the State	e of Florida. RE: Electro	ng Trust Fund Contribution ().	-	Date IGES TO OFFICERS AND DIRECTO
in the State	e of Florida. RE: Electro mpaign Financii S AND DIREC P (GONZALEZ, A	ng Trust Fund Contribution ().	-	
in the State SIGNATUI Election Car OFFICER: Title: Name: Address:	e of Florida. RE: Electro mpaign Financii S AND DIREC P (GONZALEZ, A 701 BRICKEL MIAMI, FL DVP (DE PARQUET	ng Trust Fund Contribution (). CTORS:) Delete NOTONIO A., P.	ADDITIONS/CHAN Title: Name: Address:	IGES TO OFFICERS AND DIRECTO
in the State SIGNATUI Election Car OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida. RE: Electro mpaign Financia S AND DIRECT P (GONZALEZ, F 701 BRICKEL MIAMI, FL DVP (DE PARQUET 701 BRICKEL MIAMI, FL AS (DE KOHNEN,	ng Trust Fund Contribution (). CTORS:) Delete NNTONIO A., P. L AVE SUITE 3000) Delete , ANA JOSE, FINA AVE SUITE 3000) Delete ANA ALICE L AVE SUITE 3000	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address:	IGES TO OFFICERS AND DIRECTO () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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: ANTONIO A.P. GONZALEZ, ANTONIO P 04/16/2007