

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V28266

**FILED**  
**Jan 27, 2011**  
**Secretary of State**

**Entity Name:** S.U.R. CORPORATION, UNITED SYSTEMS OF RETRANSMISSION

**Current Principal Place of Business:**

9737 NW 41ST STREET  
MBE 354  
DORAL, FL 33178 US

**New Principal Place of Business:**

8181 NW 14 ST  
SUITE 250  
MIAMI, FL 33126 US

**Current Mailing Address:**

9737 NW 41ST STREET  
MBE 354  
DORAL, FL 33178 US

**New Mailing Address:**

8181 NW 14 ST  
SUITE 250  
MIAMI, FL 33126 US

**FEI Number:** 65-0331256

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAMANEZ, RICARDO  
8181 NW 14 ST.  
SUITE 250  
MIAMI, FL 33126 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: CD  
Name: DELGADO PASTORINO, ARTURO  
Address: 8181 NW 14 STREET, SUITE 250  
City-St-Zip: MIAMI, FL 33126

Title: PD  
Name: DELGADO PASTORINO, ALVARO  
Address: 8181 NW 14 ST SUITE 250  
City-St-Zip: MIAMI, FL 33126

Title: VSTD  
Name: HARRISON IBARRA, ALEJANDRO  
Address: 8181 NW 14 ST SUITE 250  
City-St-Zip: MIAMI, FL 33126

Title: CFO  
Name: SAMANEZ, RICARDO  
Address: 8181 NW 14 ST SUITE 250  
City-St-Zip: MIAMI, FL 33126

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: RICARDO SAMANEZ

CFO

01/27/2011

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

\_\_\_\_\_  
Date