

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000000020

**Entity Name:** INVERSIONES TURISTICAS DORAL (INTUDORAL) C.A., CORP.

**FILED  
Apr 20, 2018  
Secretary of State  
CC7673378893**

**Current Principal Place of Business:**

1800 NW 24TH AVENUE  
SUITE 1013  
MIAMI, FL 33125

**Current Mailing Address:**

P.O. BOX 565698  
MIAMI, FL 33256

**FEI Number: 27-4479123**

**Certificate of Status Desired: No**

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

VILA, OSCAR G  
1800 NW 24TH AVENUE  
SUITE 1013  
MIAMI, FL 33125 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title	C	Title	D
Name	MENDEZ, BENITO	Name	VILA, OSCAR G
Address	20121 SW 114 AVENUE	Address	1800 NW 24TH AVENUE, SUITE 911
City-State-Zip:	MIAMI FL 33189	City-State-Zip:	MIAMI FL 33125
Title	S		
Name	IBARRA, ALMIDA J		
Address	CONDOMINIO DORAL BEACH VILLAS		
City-State-Zip:	PUERTO LA CRUZ, VENEZUELA AL		

*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: OSCAR G. VILA**

**DIRECTOR**

**04/20/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date