

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000002789

**Entity Name:** IFE ILE, INC.

**Current Principal Place of Business:**

1336 NW 25 ST.  
MIAMI, FL 33142

**Current Mailing Address:**

1336 NW 25 ST.  
MIAMI, FL 33142 US

**FEI Number:** 65-0757333

**Certificate of Status Desired:** No

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

TORRES, F. NERI  
1336 NW 25 ST.  
MIAMI, FL 33142 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 PD  
Name TORRES, F. NERI  
Address 1336 NW 25 ST.  
NONE  
City-State-Zip: MIAMI FL 33142

Title EXECUTIVE SECRETARY  
Name SQUIRES, GILBERT K  
Address 767 ARTHUR GODFREY RD.  
City-State-Zip: MIAMI BEACH FL 33140

Title TD  
Name BENJAMIN-FULLER, KAMEELAH  
Address 1336 NW 25 ST.  
NONE  
City-State-Zip: MIAMI FL 33142

Title SD  
Name OCHOA, AILEEN  
Address 6450 COLLINS AVE. #609  
City-State-Zip: MIAMI BEACH FL 33141

Title SD  
Name HUNTER, MELISSA  
Address 1025 SW 112 TERRACE  
City-State-Zip: PEMBROKE PINE FL 33025

Title VP  
Name TORRES, CLAUDINA  
Address 1336 NW 25 ST.  
City-State-Zip: MIAMI FL 33142

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TORRES, F. NERI

**DIRECTOR**

**04/28/2015**

Electronic Signature of Signing Officer/Director Detail

Date