

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005344

Entity Name: NOSTOS, INC.

Current Principal Place of Business:

2929 SW 3RD AVENUE
SUITE 614
MIAMI, FL 33129

FILED
Mar 16, 2015
Secretary of State
CC8628356110

Current Mailing Address:

2929 SW 3RD AVENUE
SUITE 614
MIAMI, FL 33129 US

FEI Number: 65-0705524

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAVRIDIS, VASSILIOS
2929 SW 3RD AVENUE
SUITE 614
MIAMI, FL 33129 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: VASSILIOS MAVRIDIS

03/16/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name ALEXANDRAKIS, PLATON
Address 2929 SW 3 AVE SUITE 614
City-State-Zip: MIAMI FL 33129

Title DIRECTOR
Name KASSELAKIS, ANGIE
Address 2929 SW 3 AVE SUITE 614
City-State-Zip: MIAMI FL 33129

Title DIRECTOR
Name CABRERA, ANA
Address 1801 SW 3RD AVE. SUITE 200
City-State-Zip: MIAMI FL 33129

Title DIRECTOR
Name GANTZIOS, PETROS
Address 2929 SW 3 AVE SUITE 614
City-State-Zip: MIAMI FL 33129

Title PD
Name MAVRIDIS, VASSILIS
Address 2929 SW 3RD AVE. SUITE 614
City-State-Zip: MIAMI FL 33129

Title VD
Name MONOCANDILOS, NICK
Address 2929 SW 3RD AVE SUITE 614
City-State-Zip: MIAMI FL 33129

Title TD
Name MOUTSATSOS, VILMA
Address 2929 SW 3RD AVE SUITE 614
City-State-Zip: MIAMI FL 33129

Title SD
Name MPOGIATZIS, NIRIA
Address 2929 SW 3RD AVE SUITE 614
City-State-Zip: MIAMI FL 33129

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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: VASSILIS MAVRIDIS

PRESIDENT

03/16/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name PSONI, MARIA
Address 2929 SW 3 AVE SUITE 614
City-State-Zip: MIAMI FL 33129

Title D
Name GLEOUDIS, NIKI
Address 2929 SW 3 AVE SUITE 614
City-State-Zip: MIAMI FL 33129