

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 388236

**Entity Name:** REFRICENTER OF MIAMI, INC.**Current Principal Place of Business:**7101 NW 43RD ST  
MIAMI, FL 33166**Current Mailing Address:**7101 NW 43RD ST  
MIAMI, FL 33166**FEI Number:** 59-1362709**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HERNANDEZ, JOSE CP  
7101 NW 43RD ST  
MIAMI, FL 33166 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	P
Name	HERNANDEZ, JOSE
Address	7101 NW 43RD ST
City-State-Zip:	MIAMI FL 33166

Title	SD
Name	ARVESU, PEDRO
Address	7101 NW 43RD ST
City-State-Zip:	MIAMI FL 33166

Title	VPT
Name	HERNANDEZ, CIRILO
Address	7101 NW 43RD ST
City-State-Zip:	MIAMI FL 33166

Title	AS
Name	HERNANDEZ, JOSE C
Address	7101 NW 43RD ST
City-State-Zip:	MIAMI FL 33166

Title	C
Name	VALDES, ARMANDO JR
Address	7101 NW 43RD ST
City-State-Zip:	MIAMI FL 33166

*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:** ARMANDO VALDES**CONTROLLER****03/24/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date