# 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: NELDA M. ADAMS

Electronic Signature of Signing Officer/Director Detail

r Detail

# 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 630120

Entity Name: LAUREATE IMPORTS COMPANY

### **Current Principal Place of Business:**

3590 CHEROKEE STREET STE 101A KENNESAW, GA 30144

#### **Current Mailing Address:**

3590 CHEROKEE STREET STE 101A KENNESAW, GA 30144 US

#### FEI Number: 59-1918862

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

BUSINESS FILINGS INCORPORATED 515 E. PARK AVENUE TALLAHASSEE, FL 32301 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

#### **Officer/Director Detail :**

Title	PD	Title	VS
Name	JANEZ, ZOBEC	Name	VALENTINCIC, ANDREJ
Address	TRZASKA CESTA 132	Address	TRZASKA CESTA 132
City-State-Zip:	LJUBLJANA SI 1000	City-State-Zip:	LJUBLJANA SI 1000
		<u> </u>	
Title	VP	Title	Т
Title Name	VP SCHERMERHORN, JOHN C	Title Name	T ADAMS, NELDA M
			T ADAMS, NELDA M 5755 JACOBS ROAD

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

TREAS

TREASURER

01/16/2013

## FILED Jan 16, 2013 Secretary of State CC8231051982

Certificate of Status Desired: Yes

Date

Date