## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 686462** 

**Entity Name: ELSALEN CORPORATION** 

**Current Principal Place of Business:** 

EDIF. UNION, 4TA AVE LOS PALOS GRANDES APT 15 TORRE B

CARACAS, CHACAO 1060

**Current Mailing Address:** 

MORRISON BROWN ARGIZ & FARRA, LLC 1450 BRICKELL AVENUE 18TH FLOOR MIAMI, FL 33131 US

FEI Number: 59-2034428 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE SOLUTIONS OF SOUTH FLORIDA, INC 4651 SHERIDAN STREET SUITE 355

HOLLYWOOD, FL 33021 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: SALOMON ESQUENAZI, DIRECTOR

03/21/2016

**FILED** Mar 21, 2016

**Secretary of State** 

CC3265623188

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title Title S

Name CERTAD, LEONARDO Name CERTAD, LUISA

Address ED. UNION, 4TA AVE. LOS PALOS Address EDIF. UNION, 4TA AVE LOS PALOS

**GRANDES GRANDES** APTO 15 TORRE B

APT 15 TORRE B

CARACAS CHACAO 1060 CARACAS 1060 City-State-Zip: City-State-Zip:

Title Title D

CERTAD, IVONNE CECILIA Name BENHARDT, LETICIA Name

Address EDIF. UNION, 4TA AVE LOS PALOS Address EDIF. UNION, 4TA AVE LOS PALOS **GRANDES** 

**GRANDES** APT 15 TORRE B APT 15 TORRE B

City-State-Zip: CARACAS 1060 City-State-Zip: CARACAS 1060

Title D

Name CERTAD, MERCEDES

EDIF. UNION, 4TA AVE LOS PALOS Address

**GRANDES** 

APT 15 TORRE B

City-State-Zip: CARACAS 1060

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: LEONARDO CERTAD

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03/21/2016