

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K31979

**Entity Name:** LIMOGES ENTERPRISES N.V., INC.

**Current Principal Place of Business:**

5275 NW 7TH STREET  
103  
MIAMI, FL 33126-3322

**Current Mailing Address:**

5275 NW 7TH STREET  
103  
MIAMI, FL 33126-3322 US

**FEI Number:** 65-0078607

**Certificate of Status Desired:** No

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

BEST ACCOUNTING, INC  
10200 NW 25 ST  
SUITE 209  
DORAL, FL 33172 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 VPD  
Name PAZ, CARLOS ARCESIO  
Address 10200 NW 25 ST SUITE 209  
City-State-Zip: DORAL FL 33172

Title PD  
Name PAZ, FERNANDO  
Address 10200 NW 25 ST SUITE 209  
City-State-Zip: DORAL FL 33172

Title SD  
Name PAZ, LUZ MARINA  
Address 10200 NW 25 ST SUITE 209  
City-State-Zip: DORAL FL 33172

*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:** CARLOS ARCESIO PAZ

VPD

01/11/2017

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date