

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K42382

**FILED  
Feb 22, 2015  
Secretary of State  
CC8575457469**

**Entity Name:** BRIAN SOARES CORPORATION

**Current Principal Place of Business:**

C/O JONNY'S SHOE REPAIR  
13061 KENDAL DRIVE  
MIAMI, FL 33186

**Current Mailing Address:**

C/O JONNY'S SHOE REPAIR  
13061 KENDAL DRIVE  
MIAMI, FL 33186

**FEI Number:** 65-0082016

**Certificate of Status Desired:** Yes

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

DE MORAIS, SERGIO SOARES  
15745 SW 102ST  
MIAMI, FL 33196 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 DE MORAIS, SERGIO SOARES  
Address 13061 SW 88 STREET  
City-State-Zip: MIAMI FL 33186

Title V/S  
Name DE MORAIS, VIVIAN SOARES  
Address 13061 SW 88 STREET  
City-State-Zip: MIAMI FL 33186

Title S  
Name DE MORAIS, VIVIAN SOARES  
Address C/O JOHYNNIS SHOE REPAIR  
City-State-Zip: MIAMI FL 33186

*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:** SERGIO SOARERS

**PRESIDENT**

**02/22/2015**

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

\_\_\_\_\_ Date