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: DARLENE GALDO

Electronic Signature of Signing Officer/Director Detail

FEI Number: 65-0192657

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

VALDES, FRANCISCO 8190 NW 66 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:

Officer/Director Detail :			
Title	PD	Title	AS
Name	GALDO, DARLENE	Name	MURAI, RENE V
Address	1200 PONCE DE LEON BOULEVARD	Address	1200 PONCE DE LEON BOULEVARD
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134

Certificate of Status Desired: No

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L36222

Entity Name: 700 COMMODORE, INC.

Current Principal Place of Business:

8190 NW 66TH ST MIAMI, FL 33166

Current Mailing Address:

8190 NW 66TH ST MIAMI, FL 33166 US

PRESIDENT

04/12/2013

Date

FILED Apr 12, 2013 Secretary of State CC9587271997

Date