2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M39006

Entity Name: 2990 ENTERPRISES INC.

Current Principal Place of Business:

6195 W 19TH AVE OFFICE HIALEAH, FL 33012-6013

Current Mailing Address:

6195 W 19TH AVE # OFFICE HIALEAH, FL 33012-6013

FEI Number: 59-2736073

Name and Address of Current Registered Agent:

SANCHEZ, CARLOS 6195 W 19TH AVE OFFICE HIALEAH, FL 33012-6013 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 | Ρ | Title | SECRETARY |
|--|-----------------|---------------------------|-----------------|---------------------------|
| | Name | SANCHEZ, CARLOS | Name | SANCHEZ, CHRISTOPHER |
| | Address | 6195 W 19TH AVE, # OFFICE | Address | 6195 W 19TH AVE, # OFFICE |
| | City-State-Zip: | HIALEAH FL 33012-6013 | City-State-Zip: | HIALEAH FL 33012 |
| | | | | |
| | Title | TREASURER | | |
| | Name | SANCHEZ, MICHAEL | | |
| | Address | 6195 W 19TH AVE, # OFFICE | | |
| | City-State-Zip: | HIALEAH FL 33012 | | |
| | | | | |

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: SANCHEZ, CARLOS

PRESIDENT

04/05/2014

Date

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date