

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M44424

**Entity Name:** VENMARK OF FLORIDA, INC.**Current Principal Place of Business:**

C/O ROBERT TARABOULOS  
9300 SOUTH DADELAND BOULEVARD, SUITE 600  
SOUTH MIAMI, FL 33156

**Current Mailing Address:**

C/O ROBERT TARABOULOS  
9300 SOUTH DADELAND BOULEVARD, SUITE 600  
MIAMI, FL 33156

**FEI Number:** 59-2826161**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

THOMAS BLECHINGBERG  
9300 SOUTH DADELAND BOULEVARD,  
SUITE 600  
MIAMI, FL 33156 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 PD  
Name BLECHINGBERG, YOLANDA  
Address 9400 SOUTH DADELAND  
BOULEVARD, SUITE 601  
City-State-Zip: MIAMI FL 33156

Title VTD  
Name BLECHINGBERG, THOMAS  
Address 9300 SOUTH DADELAND  
BOULEVARD, SUITE 600  
City-State-Zip: MIAMI FL 33156

Title SD  
Name BLECHINGBERG, WILLIAM D  
Address 9300 SOUTH DADELAND  
BOULEVARD, SUITE 600  
City-State-Zip: MIAMI FL 33156

Title AS  
Name ROBERT TARABOULOS  
Address 9300 SOUTH DADELAND  
BOULEVARD, SUITE 600  
City-State-Zip: MIAMI FL 33156

Title VD  
Name SICHEL, VIVIAN  
Address 14719 CLARENDON DR  
City-State-Zip: TAMPA FL 33624

*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:** THOMAS BLECHINGBERG

VTD

03/20/2014

Electronic Signature of Signing Officer/Director Detail

Date