

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M95680

**Entity Name:** COOLIDGE, INC.

**Current Principal Place of Business:**

C/O KUPFER SKOLNICK P.A.  
5541 UNIVERSITY DR., SUITE 103  
CORAL SPRINGS, FL 33067

**Current Mailing Address:**

C/O KUPFER SKOLNICK P.A.  
5541UNIVERSITY DR., SUITE 103  
CORAL SPRINGS, FL 33067 US

**FEI Number:** 52-1529822

**Certificate of Status Desired:** No

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

KUPFER, PAUL H., ESQ.  
5541 UNIVERSITY DR.  
103  
CORAL SPRINGS, FL 33067 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 VTSD  
Name DIAZ, ANA MARIA D  
Address 5541 UNIVERSITY DRIVE  
City-State-Zip: CORAL SPRINGS FL 33067

Title PD  
Name DIAZ LAVIE, CELESTINO I  
Address 5541 UNIVERSITY DRIVE  
City-State-Zip: CORAL SPRINGS FL 33067

Title VD  
Name FERNANDEZ, CELESTINO I  
Address 5541 UNIVERSITY DRIVE  
City-State-Zip: CORAL SPRINGS FL 33067

Title VD  
Name FERNANDEZ, RODRIGO D  
Address 5541 UNIVERSITY DRIVE  
City-State-Zip: CORAL SPRINGS FL 33067

*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:** DIAZ LAVIE, CELESTINO

**PRESIDENT**

**04/06/2015**

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

\_\_\_\_\_  
Date