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: ARRUDA, LINEU J

Electronic Signature of Signing Officer/Director Detail

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000022179

Entity Name: PROKONSULT BUSINESS ADMINISTRATION COMPANY

Current Principal Place of Business:

1689 PASSION VINE CIRCLE WESTON, FL 33326

Current Mailing Address:

P.O.BOX # 267578 WESTON, FL 33326-7578 US

FEI Number: 65-0988532

Name and Address of Current Registered Agent:

ARRUDA, LINEU JPRES 1689 PASSION VINE CIRCLE WESTON, FL 33326 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	MR	Title	MR
Name	ARRUDA, LINEU JPRES	Name	ARRUDA, MAURICIO L
Address	1689 PASSION VINE CIRCLE	Address	1689 PASSION VINE CIRCLE
City-State-Zip:	WESTON FL 33326	City-State-Zip:	WESTON FL 33326

PRESIDENT

02/02/2015 Date

FILED Feb 02, 2015 Secretary of State CC5522187686

Certificate of Status Desired: Yes

Date