

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000112480

**Entity Name:** EMERGENCIA 2000, INC.

**Current Principal Place of Business:**

10400 NW 21 ST.  
SUITE #115  
MIAMI, FL 33172

**Current Mailing Address:**

10400 NW 21 ST.  
SUITE #115  
MIAMI, FL 33172 US

**FEI Number:** 65-1059831

**Certificate of Status Desired:** No

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

ALVAREZ, EMILIO B  
650 NW 43RD ST  
MIAMI, FL 33126 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	MGR
Name	AVILA, MARIA D
Address	8578 N. W. 23RD. ST.
City-State-Zip:	MIAMI FL 33122
Title	SECRETARY
Name	CARRION, JULIAN
Address	POLIGONO INDUSTRIAL COBO CALLEJA CALLE VALENCIA DE D. JUAN23
City-State-Zip:	MADRID FUENLABRADA 28947

Title	GENERAL MANAGER/ADMINISTRATOR
Name	CARRION, JULIAN
Address	POLIGONO INDUSTRIAL COBO CALLEJA CALLE VALENCIA DE D. JUAN23
City-State-Zip:	MADRID FUENLABRADA 28947

*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:** MARIA DOLORES AVILA

**MANAGER**

**04/27/2014**

Electronic Signature of Signing Officer/Directe

Date