

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000045387

**Entity Name:** SUMMERVILLE DEVELOPMENT, INC.

**Current Principal Place of Business:**

5979 SW 56TH ST  
MIAMI, FL 33155

**FILED**  
**Feb 21, 2017**  
**Secretary of State**  
**CC3077433062**

**Current Mailing Address:**

C/O ELLIOTT HARIRS  
111 SW 3 STREET, 6 FLOOR  
MIAMI, FL 33130 US

**FEI Number: 56-2306279**

**Certificate of Status Desired: No**

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

HARRIS, ELLIOTT ESQ  
111 SW 3RD ST  
SIXTH FLOOR  
MIAMI, FL 33130 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 GARCIA-CARRILLO, MICHAEL  
Address 5979 SW 56TH ST  
City-State-Zip: MIAMI FL 33155

Title VD  
Name GARCIA-CARRILLO, PEDRO  
Address 5979 SW 56TH ST  
City-State-Zip: MIAMI FL 33155

Title SD  
Name GARCIA-CARRILLO, MARITZA  
Address 5979 SW 56TH ST  
City-State-Zip: MIAMI FL 33155

*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: MICHAEL GARCIA-CARRILLO**

**PD**

**02/21/2017**

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

\_\_\_\_\_  
Date