Electronic Signature of Signing Officer/Director Detail

# 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000056555

Entity Name: CBI MANAGEMENT, INC.

## **Current Principal Place of Business:**

11767 S. DIXIE HWY 197 MIAMI, FL 33156

# **Current Mailing Address:**

11767 S. DIXIE HWY 197 MIAMI, FL 33156 US

### FEI Number: 74-3093144

### Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

GIAMMATTEI, JAIME 11767 S.DIXIE HWY 197 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:

#### ... **/D** ·

Officer/Director Detail :			
Title	PRESIDENT	Title	SECRETARY
Name	GIAMMATTEI, JAIME	Name	GIAMMATTEI, JAIME
Address	11767 S. DIXIE HIGHWAY, 197	Address	11767 S. DIXIE HWY
City-State-Zip:	MIAMI FL 33156		197
		City-State-Zip:	MIAMI FL 33156

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.

PRESIDENT

Date

Certificate of Status Desired: No

FILED Mar 26, 2015 Secretary of State CC4153936182

03/26/2015

Date