# 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

PD

above, or on an attachment with all other like empowered.

SIGNATURE: CARLOS R CICERO

Electronic Signature of Signing Officer/Director Detail

## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000105704

Entity Name: PINECREST INVESTMENT CORP.

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

16225 SW117 AVE 18 MIAMI, FL 33177

## **Current Mailing Address:**

P.O. BOX 830683 MIAMI, FL 33283

## FEI Number: 20-0254142

## Name and Address of Current Registered Agent:

CICERO, CARLOS R 12945 SW 72 TERR MIAMI, FL 33183 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	PD	Title	VD
Name	CICERO, CARLOS R	Name	CICERO, ALINA
Address	P.O. BOX 830683	Address	P.O. BOX 830683
City-State-Zip:	MIAMI FL 33283	City-State-Zip:	MIAMI FL 33283

FILED Mar 04, 2015 Secretary of State CC2584323739

Date

Certificate of Status Desired: No

03/04/2015 Date