

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000054864

**FILED  
Jan 26, 2015  
Secretary of State  
CC1993730257**

**Entity Name:** VIMARJU CORPORATION

**Current Principal Place of Business:**

169 EAST FLAGLER  
PENTHOUSE  
MIAMI, FL 33131

**Current Mailing Address:**

169 EAST FLAGLER  
PENTHOUSE  
MIAMI, FL 33131

**FEI Number:** 52-1336713

**Certificate of Status Desired:** No

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

ATRIUM REGISTERED AGENTS, INC.  
1500 SAN REMO AVENUE  
SUITE 125  
CORAL GABLES, FL 33146 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 LINDENFELD, DANYA  
Address 169 E. FLAGLER ST., PENTHOUSE  
City-State-Zip: MIAMI FL 33131

Title VD  
Name LINDENFELD, MARTIN  
Address 169 E. FLAGLER ST., PENTHOUSE  
City-State-Zip: MIAMI FL 33131

Title TD  
Name BENHAMRON, URI  
Address 169 E. FLAGLER ST., PENTHOUSE  
City-State-Zip: MIAMI FL 33131

Title S  
Name RESSLER, GARY  
Address 169 E. FLAGLER ST., PENTHOUSE  
City-State-Zip: MIAMI FL 33131

*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:** URI BENHAMRON

**TD**

**01/26/2015**

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

\_\_\_\_\_  
Date