

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000164549

**Entity Name:** VENEZUELA FLUID SYSTEM TECHNOLOGIES, INC.

**Current Principal Place of Business:**

9420 POINCIANA PLACE  
#101  
DAVIE, FL 33324

**FILED**  
**Apr 09, 2014**  
**Secretary of State**  
**CC8146839093**

**Current Mailing Address:**

9420 POINCIANA PLACE  
#101  
DAVIE, FL 33324 US

**FEI Number: 52-2451460**

**Certificate of Status Desired: No**

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

MIKE'S TAX & ACCOUNTING, INC.  
269 N. UNIVERSITY DRIVE  
SUITE B  
PEMBROKE PINES, FL 33024 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 P/D  
Name MONTES RODRIGUEZ, LEONARDO  
Address 9420 POINCIANA PLACE, #101  
City-State-Zip: DAVIE FL 33324

Title VP/D  
Name VELEZ DE MONTES, MARTHA C  
Address 9420 POINCIANA PLACE, #101  
City-State-Zip: DAVIE FL 33324

Title S  
Name MONTES V., MARTHA E  
Address 9420 POINCIANA PLACE, #101  
City-State-Zip: DAVIE FL 33324

*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: LEONARDO MONTES RODRIGUEZ**

**MANAGER**

**04/09/2014**

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

\_\_\_\_\_  
Date