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	: CLAUDIA CZETYRKO			06/01/2016
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PD	Title	VSD	
Name	MIRANDA, GABRIEL	Name	BUES, ALICIA	
Address	19341 HOLIDAY ROAD	Address	19341 HOLIDAY ROAD	
City-State-Zip:	MIAMI FL 33157	City-State-Zip:	MIAMI FL 33157	
Title	TD			
Name	BUES, ERNESTO			
Address	19341 HOLIDAY ROAD			
City-State-Zip:	MIAMI FL 33157			

9290 SW 72 ST SUITE 103 MIAMI. FL 33173 US

Current Mailing Address:

FEI Number: 20-2301922

Name and Address of Current Registered Agent:

CLAUDIA CZETYRKO CPA PA 7660 SW 83 CT MIAMI, FL 33143 US

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: BUES ERNESTO

Electronic Signature of Signing Officer/Director Detail

FILED Jun 01, 2016 Secretary of State CC6737234118

Certificate of Status Desired: No

TD

06/01/2016

DOCUMENT# P05000015042

2016 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

Entity Name: SOUTH CROSS INC.

Current Principal Place of Business:

9290 SW 72 ST SUITE 103 MIAMI, FL 33173