

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000102517

**Entity Name:** KLUB WEST, INC.**Current Principal Place of Business:**55 MERRICK WAY  
812  
CORAL GABLES, FL 33134**Current Mailing Address:**55 MERRICK WAY  
812  
CORAL GABLES, FL 33134 US**FEI Number:** 20-5340768**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DEL ROSSI, JOHN J  
2575 SOUTH BAYSHORE DRIVE  
B1  
MIAMI, FL 33133 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
Name	DEL ROSSI, LOURDES
Address	55 MERRICK WAY 812
City-State-Zip:	CORAL GABLES FL 33134

Title	SEC
Name	DEL ROSSI, CATERINA F
Address	55 MERRICK WAY 812
City-State-Zip:	CORAL GABLES FL 33134

Title	VP
Name	DEL ROSSI, JOHN J
Address	2575 SOUTH BAYSHORE DRIVE B1
City-State-Zip:	MIAMI FL 33133

Title	T/D
Name	DEL ROSSI, GIORGIO
Address	55 MERRICK WAY 812
City-State-Zip:	CORAL GABLES FL 33134

*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:** LOURDES DEL ROSSI**PRESIDENT****04/12/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date