

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000045224

**Entity Name:** BARSOT INVESTMENTS, INC.

**FILED**  
**Apr 11, 2017**  
**Secretary of State**  
**CC5944860802**

**Current Principal Place of Business:**

3650 NW 82ND AVE  
STE 404  
DORAL, FL 33166

**Current Mailing Address:**

3650 NW 82ND AVE  
STE 404  
DORAL, FL 33166 US

**FEI Number: 39-2053159**

**Certificate of Status Desired: No**

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

BARRETO, LUIS  
3650 NW 82ND AVE  
STE 404  
DORAL, FL 33166 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 BARRETO, LUIS  
Address 3650 NW 82ND AVE STE 404  
City-State-Zip: DORAL FL 33166

Title T  
Name SOTO MONTOYA, LUZ STELLA  
Address 3650 NW 82ND AVE STE 404  
City-State-Zip: DORAL FL 33166

Title D  
Name BARRETO SOTO, LENE SHISKA  
Address 3650 NW 82ND AVE STE 404  
City-State-Zip: DORAL FL 33166

Title D  
Name BARRETO SOTO, LUIS FELIPE  
Address 3650 NW 82ND AVE STE 404  
City-State-Zip: DORAL FL 33166

Title D  
Name BARRETO SOTO, JAIME DANIEL  
Address 3650 NW 82ND AVE STE 404  
City-State-Zip: DORAL FL 33166

*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: LUIS BARRETO**

**PD**

**04/11/2017**

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

\_\_\_\_\_  
Date