

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000077196

**Entity Name:** WOLVES TECHNOLOGIES, CORP.

**Current Principal Place of Business:**

1912 SAND ARBOR CIR  
ORLANDO, FL 32824

**Current Mailing Address:**

1912 SAND ARBOR CIR  
ORLANDO, FL 32824 US

**FEI Number:** 26-0519652

**Certificate of Status Desired:** No

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

VILLALOBOS, GABRIEL A  
1912 SAND ARBOR CIR  
ORLANDO, FL 32824 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            PRES  
Name            VILLALOBOS, GABRIEL A  
Address        1912 SAND ARBOR CIR.  
City-State-Zip: ORLANDO FL 32824

Title            VP  
Name            GOTERA, PAOLA I  
Address        1912 SAND ARBOR CIR.  
City-State-Zip: ORLANDO FL 32824

*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:** GABRIEL VILLALOBOS

**PRESIDENT**

**04/30/2017**

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

\_\_\_\_\_  
Date