# 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# P08000068056

Entity Name: INNOVA COLLEGE VIRTUAL CAMPUS, INC.

# **Current Principal Place of Business:**

111 NE 1ST STREET SUITE 300 MIAMI, FL 33131

# **Current Mailing Address:**

111 NE 1ST STREET SUITE 300 MIAMI, FL 33131 US

# FEI Number: 80-0226377

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

MILLER, BROOKS C 200 SOUTH BISCAYNE BOULEVARD SUITE 4300 MIAMI, FL 33131 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

#### **Officer/Director Detail :**

Oncer/Director Detail :			
Title	D, PRESIDENT, CEO	Title	D
Name	MALDONADO VILLASENOR, ERICH R	Name	GIORDANO COVARRUBIAS, RUBEN
Address	2240 ALMEDA	Address	2240 ALAMEDA
City-State-Zip:	SANTIAGO CENTRO XX XX	City-State-Zip:	SANTIAGO CENTRO SANTIAGO XX XX
Title Name Address City-State-Zip:	D, VP, SECRETARY HERANE, MARIO 111 NE 1ST STREET SUITE 300 MIAMI FL 33131	Title Name Address City-State-Zip:	D CORTES, CRISTIAN 2240 ALAMEDA SANTIAGO CENTRO XX XX
Title Name Address	D SOTO, PATRICIO AV. AMERICO VESPUCIO 357		

City-State-Zip: LAS CONDES SANTIAGO XX XX

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: MARIO HERANE

VP, SECRETARY

02/09/2016

Date

Electronic Signature of Signing Officer/Director Detail

# FILED Feb 09, 2016 Secretary of State CC1888878563

Certificate of Status Desired: No

Date