## 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.

CEO

## SIGNATURE: GREGORY AGUIRRE

Electronic Signature of Signing Officer/Director Detail

GREGORY, AGUIRRE 3000 S OCEAN DR
1106 HOLLYWOOD, FL 33019 US
The above named entity submits this statement for the purpose of changing its registered office

Name and Address of Current Registered Agent:

e or registered agent, or both, in the State of Florida.

## SIGNATURE:

3000 S OCEAN DR

PO BOX 3791

HOLLYWOOD, FL 33019

**Current Mailing Address:** 

HALLANDALE, FL 33008

FEI Number: 26-3486766

City-State-Zip: HALLANDALE FL 33008

1106

DOCUMENT# P08000088062

Entity Name: U.S. CAPITAL SOURCE CORP

**Current Principal Place of Business:** 

Electronic Signature of Registered Agent **Officer/Director Detail :** Title CEO Title PRES AGUIRRE, GREGORY AGUIRRE, ALEXANDRA Name Name PO BOX 3791

PO BOX 3791 Address Address

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

HALLANDALE FL 33008

City-State-Zip:

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Certificate of Status Desired: No

FILED Apr 30, 2014 Secretary of State CC6138131367

Date

Date

04/30/2014