

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000108567

**FILED**  
**Jan 10, 2014**  
**Secretary of State**  
**CC6932196212**

**Entity Name:** SARA VALLECILLA DESIGNS CORP

**Current Principal Place of Business:**

2605 OAKBROOK CT  
WESTON, FL 33332

**Current Mailing Address:**

2605 OAKBROOK CT  
WESTON, FL 33332

**FEI Number:** 26-3857435

**Certificate of Status Desired:** No

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

VALLECILLA, SARA  
2605 OAKBROOK CT  
WESTON, FL 33332 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	Title	OFFICER MANAGER
Name	VALLECILLA, SARA	Name	MADRINAN, CARLOS A SR.
Address	2605 OAKBROOK CT	Address	2605 OAKBROOK CT
City-State-Zip:	WESTON FL 33332	City-State-Zip:	WESTON FL 33332

Title           DIRECTOR  
Name           MADRINAN, CAMILO SR.  
Address        2605 OAKBROOK CT  
City-State-Zip: WESTON FL 33332

*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:** SARA VALLECILLA

**DIRECTOR**

**01/10/2014**

Electronic Signature of Signing Officer/Director Detail

Date