

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000006594

**Entity Name:** EPIC UNIT 3403, INC.

**Current Principal Place of Business:**

5076 NW 113 PLACE  
DORAL, FL 33178

**FILED**  
**Jan 26, 2015**  
**Secretary of State**  
**CC1785350568**

**Current Mailing Address:**

12394 SW 82ND AVENUE  
PINECREST, FL 33156

**FEI Number: 27-0452191**

**Certificate of Status Desired: No**

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

VASALLO SLOANE, P.L.  
12394 SW 82ND AVENUE  
PINECREST, FL 33156 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 DP  
Name VACA, IVAN  
Address 12394 SW 82ND AVENUE  
City-State-Zip: PINECREST FL 33156

Title DVST  
Name VACA KALTHOFF, IVAN A  
Address 12394 SW 82ND AVENUE  
City-State-Zip: PINECREST FL 33156

Title DVST  
Name BARQUERO, ADELA MARIA  
Address 12394 SW 82ND AVENUE  
City-State-Zip: PINECREST FL 33156

Title DVST  
Name VACA KALTHOFF, FELIPE E  
Address 12394 SW 82ND AVENUE  
City-State-Zip: PINECREST FL 33156

*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: ADELA MARIA BARQUERO**

**VICE PRESIDENT**

**01/26/2015**

Electronic Signature of Signing Officer/Director Detail

Date