

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000054080

**Entity Name:** ENEAS RIVAS P.A.

**Current Principal Place of Business:**

8045 NW 36 ST  
532 A  
MIAMI, FL 33166

**Current Mailing Address:**

8045 NW 36 ST  
532 A  
MIAMI, FL 33166 US

**FEI Number:** 90-0498428

**Certificate of Status Desired:** Yes

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

RIVAS, ENEAS  
8045 NW 36 ST  
532 A  
MIAMI, FL 33166 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 PD  
Name RIVAS, ENEAS  
Address 8045 NW 36 ST  
532 A  
City-State-Zip: MIAMI FL 33166

*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:** ENEAS RIVAS

**DIRECTOR**

**03/31/2014**

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

\_\_\_\_\_  
Date