

**2014 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P09000087414

**FILED**  
**Feb 27, 2014**  
**Secretary of State**  
**CC1933970298**

**Entity Name:** FLEURYPORP 704 INC.

**Current Principal Place of Business:**

3300 NE, 192ND ST.  
704  
AVENTURA, FL 33180

**Current Mailing Address:**

3300 NE, 192ND ST.  
704  
AVENTURA, FL 33180 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

CARABANO, FERNANDO  
21217 NE, 31 PL.  
AVENTURA, FL 33180 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 MR.  
Name FLEURY, ALEJANDRO SR.  
Address 3300 NE, 192ND ST., APT. 704  
City-State-Zip: AVENTURA FL 33180

Title MR.  
Name FLEURY HEEMSEN, ALEJANDRO  
Address CALLE LOS ALPES, QTA. MANANTIAL,  
City-State-Zip: CARACAS DF 1080

Title MR.  
Name FLEURY HEEMSEN, ALEJANDRO  
Address CALLE LOS ALPES, QTA. MANANTIAL,  
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Name FLEURY HEEMSEN, ALEJANDRO  
Address CALLE LOS ALPES, QTA. MANANTIAL,  
City-State-Zip: CARACAS DF 1080

Title MR.  
Name FLEURY HEEMSEN A, LEJANDRO  
Address CALLE LOS ALPES, QTA. MANANTIAL,  
City-State-Zip: CARACAS DF 1080

*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:** ALEJANDRO FLEURY HEEMSEN

**DR.**

**02/27/2014**

Electronic Signature of Signing Officer/Director Detail

Date