

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000005549

**Entity Name:** DECONEX INC.

**Current Principal Place of Business:**

233 MADEIRA AVE  
APT 2  
CORAL GABLES, FL 33134

**Current Mailing Address:**

233 MADEIRA AVE  
APT 2  
CORAL GABLES, FL 33134 US

**FEI Number:** 27-1717872

**Certificate of Status Desired:** Yes

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

DAVID, JOHN A  
233 MADEIRA AVE  
APT 2  
CORAL GABLES, FL 33134 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            PRESIDENT  
Name            DAVID, JOHN A  
Address        233 MADEIRA AVE  
                  APT 2  
City-State-Zip: CORAL GABLES FL 33134

Title            VP  
Name            BALLESTAS, ROSA ISABEL  
Address        233 MADEIRA AVE  
                  APT 2  
City-State-Zip: CORAL GABLES FL 33134

*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:** ROSA ISABEL BALLESTAS

**EXECUTIVE VICE-  
PRESIDENT**

**06/17/2015**

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

\_\_\_\_\_  
Date