

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000084143

**Entity Name:** ELPEN, INC

**Current Principal Place of Business:**

325 SOUTH BISCAYNE BLVD.  
LOBBY  
MIAMI, FL 33131

**Current Mailing Address:**

PO BOX 565193  
MIAMI, FL 33256

**FEI Number:** 27-3680807

**Certificate of Status Desired:** No

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

BUJAKIEWICZ, KRISTINA  
7260 S.W. 53 RD COURT  
MIAMI, FL 33143 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  
Name BUJAKIEWICZ, KRISTINA  
Address 7260 S.W. 53RD COURT  
City-State-Zip: MIAMI FL 33143

Title VP  
Name BERTNER, JONATHAN D  
Address 6601 S.W. 111 STREET  
City-State-Zip: MIAMI 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:** KRISTINA BUJAKIEWICZ

**PRESIDENT**

**01/27/2019**

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

\_\_\_\_\_  
Date