

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000015007

Entity Name: DEI VERBUM, U.S.A., CORP.**Current Principal Place of Business:**5001 S.W. 74TH COURT
SUITE # 200
MIAMI, FL 33155**Current Mailing Address:**5001 S.W. 74TH COURT
SUITE # 200
MIAMI, FL 33155 US**FEI Number:** 36-4690067**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SIMAN, MAURICIO JPRESIDE
5001 S.W. 74TH COURT
SUITE # 200
MIAMI, FL 33155 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	PRES
Name	SIMAN, MAURICIO J
Address	100 ANDALUSIA AVE. #505-06
City-State-Zip:	CORAL GABLES FL 33134

Title	VP
Name	ALFONSO, HERNANDEZ
Address	2333 BRICKEL AVE. APT. 1812
City-State-Zip:	MIAMI FL 33129

Title	SECR
Name	MORALES, LILLIAM L
Address	6141 S.W. 114TH. ST
City-State-Zip:	MIAMI FL 33173

Title	TREA
Name	SIMAN, SARA L
Address	100 ANDALUSIA AVE. #505-06
City-State-Zip:	CORAL GABLES FL 33134

Title	DIRE
Name	AGRENOT, LOREN
Address	14636 BALGOWAN ROAD
City-State-Zip:	MIAMI LAKES FL 33015

Title	DIRE
Name	PUENTE, MANUEL
Address	16285 N.W. 11TH. STREET
City-State-Zip:	PE,BROKE PINES FL 33028

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: SIMAN , MAURICIO

PRES

04/23/2015

Electronic Signature of Signing Officer/Director Detail_____
Date