BLES, FL 33146 US			
FEI Number: 45-3158223		Certificate of Status Desired: No	
Address of Current Registered Agent:			
DE LEON BLVD			
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.			
E: DANIEL P. HELLER			04/26/2018
Electronic Signature of Registered Agent			Date
ctor Detail :			
P	Title	VP	
ARRUDA, JOSE R	Name	ARRUDA, ARACELIS T	
400 ALTON ROAD UNIT 705	Address	400 ALTON ROAD UNIT 705	
MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33139	
	Address of Current Registered Agent: EL P. DE LEON BLVD ES, FL 33146-6020 US d entity submits this statement for the purpose of changing its registed d entity submits this statement for the purpose of changing its registed d entity submits this statement for the purpose of changing its registed d entity submits this statement for the purpose of changing its registed d entity submits this statement for the purpose of changing its registed d entity submits this statement for the purpose of changing its registed d entity submits this statement for the purpose of changing its registed d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered d entity submits this statement for the purpose of changing its registered ent	r: 45-3158223 Address of Current Registered Agent: EL P. DE LEON BLVD ES, FL 33146-6020 US d entity submits this statement for the purpose of changing its registered office or regist E DANIEL P. HELLER Electronic Signature of Registered Agent Ctor Detail : P Title ARRUDA, JOSE R Name 400 ALTON ROAD UNIT 705	r: 45-3158223 Address of Current Registered Agent: EL P. DE LEON BLVD ES, FL 33146-6020 US d entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flore d entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flore d entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flore d entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flore d entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flore d entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flore d entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flore d entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flore d entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flore flore d entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flore flore d entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flore flore d entity submits this statement for the purpose of changing its registered agent flore d entity submits this statement for the purpose of changing its registered agent flore

DOCUMENT# P11000053515

4005 SAN AMARO DRIVE CORAL GABLES, FL 33146

Current Mailing Address: 4005 SAN AMARO DRIVE

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: BOSSA NOVA PROPERTY, INC.

Current Principal Place of Business:

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: JOSE ROBERTO ARRUDA

MEMBER

04/26/2018

Electronic Signature of Signing Officer/Director Detail

FILED Apr 26, 2018 Secretary of State CC0541583768

Date