

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000064697

**Entity Name:** 2B4ME, INC.

**Current Principal Place of Business:**

55 MERRICK WAY  
812  
CORAL GABLES, FL 33134

**Current Mailing Address:**

55 MERRICK WAY  
812  
CORAL GABLES, FL 33134 US

**FEI Number:** 45-4976242

**Certificate of Status Desired:** No

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

DEL ROSSI, GIORGIO  
55 MERRICK WAY  
812  
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            P  
Name            DEL ROSSI, GIORGIO  
Address        55 MERRICK WAY  
                  812  
City-State-Zip: CORAL GABLES FL 33134

Title            VP  
Name            DEL ROSSI, LOURDES  
Address        55 MERRICK WAY  
                  812  
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:** LOURDES DEL ROSSI

VP

02/18/2016

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

\_\_\_\_\_  
Date