

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000069031

**Entity Name:** EXPORTECH WM INC

**Current Principal Place of Business:**

8290 LAKE DR  
535  
DORAL, FL 33166

**Current Mailing Address:**

8290 LAKE DR  
535  
DORAL, FL 33166

**FEI Number:** 45-2881644

**Certificate of Status Desired:** Yes

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

FRANCO, GLORIA L  
5769 NW 113 CT  
DORAL, FL 33178 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 MEDINA, MARZOLAYDE  
Address 8290 LAKE DR SUITE 535  
City-State-Zip: DORAL FL 33166

Title VP  
Name GARCES, WILSON  
Address 8290 LAKE DR SUITE 535  
City-State-Zip: DORAL FL 33166

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:** MARZOLAYDE MEDINA

**PRESIDENT**

**01/10/2014**

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

\_\_\_\_\_  
Date