

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000104206

**Entity Name:** TAURIN 4803, INC

**Current Principal Place of Business:**

201 S. BISCAYNE BLVD  
905  
MIAMI, FL 33131

**Current Mailing Address:**

201 S. BISCAYNE BLVD  
905  
MIAMI, FL 33131 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

FERNANDO M SOCOL PA  
201 S. BISCAYNE BLVD.  
905  
MIAMI, FL 33131 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:** FERNANDO M SOCOL

04/30/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D, P  
Name CORDOVEZ GOMEZ, SIMON  
Address 201 S. BISCAYNE BLVD., STE 905  
City-State-Zip: MIAMI FL 33131

Title D  
Name CORDOVEZ AVILES, FELIPE J  
Address 201 S. BISCAYNE BLVD., STE 905  
City-State-Zip: MIAMI FL 33131

Title S  
Name MOLINARI DE CORDOVEZ, SANDRA  
Address 201 S BISCAYNE BLVD, STE 905  
City-State-Zip: MIAMI FL 33131

Title T  
Name CORDOVEZ ESCOBAR, FELIPE  
Address 201 S BISCAYNE BLVD., STE 905  
City-State-Zip: MIAMI FL 33131

*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:** CORDOVEZ AVILES , FELIPE J

D

04/30/2018

Electronic Signature of Signing Officer/Director Detail

Date