#### SIGNATURE: MANRIQUE ALONSO

above, or on an attachment with all other like empowered.

Electronic Signature of Signing Officer/Director Detail

# 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000068747

Entity Name: MANRIQUE ALONSO INC.

## Current Principal Place of Business:

1100 S MIAMI AVE. STE. 3509 MIAMI, FL 33130

#### **Current Mailing Address:**

1100 S MIAMI AVE. STE. 3509 MIAMI, FL 33130 US

### FEI Number: 46-0770505

# Name and Address of Current Registered Agent:

ALONSO, MANRIQUE 1100 S MIAMI AVE. STE. 3509 MIAMI, FL 33130 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

### Officer/Director Detail :

Title	PRESIDENT	Title	PRESIDENT
Name	ALONSO, MANRIQUE	Name	DE LOS SANTOS, BARBARA
Address	1100 S MIAMI AVE. STE. 3509	Address	1100 S MIAMI AVE. STE. 3509
City-State-Zip	: MIAMI FL 33130	City-State-Zip:	MIAMI FL 33130

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

PRESIDENT

r registered agent, or both, in the State of Florida.

Certificate of Status Desired: No

04/20/2017

FILED Apr 20, 2017 Secretary of State CC8205878012

Date

Date