

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000080157

**Entity Name:** V105 INVESTMENTS, INC.

**Current Principal Place of Business:**

701 LAS FUENTES DR  
KISSIMEE, FL 34746

**FILED**  
**Mar 14, 2015**  
**Secretary of State**  
**CC0397056579**

**Current Mailing Address:**

6220 S ORANGE BLOSSOM TRL  
SUITE 600  
ORLANDO, FL 32809 US

**FEI Number:** 90-0949070

**Certificate of Status Desired:** No

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

SAFETY BUSINESS LLC  
6220 S ORANGE BLOSSOM TRL  
SUITE 600  
ORLANDO, FL 32809 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:** CRISTINA RIVERA

03/14/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name DA SILVA FARIA, VANUE ANTONIO  
Address 6220 S ORANGE BLOSSOM TRL  
SUITE 600  
City-State-Zip: ORLANDO FL 32809

Title VPD  
Name DA SILVA FARIA, CLEBER  
Address 6220 S ORANGE BLOSSOM TRL  
SUITE 600  
City-State-Zip: ORLANDO FL 32809

Title SD  
Name DA SILVA FARIA, CLERIO  
Address 6220 S ORANGE BLOSSOM TRL  
SUITE 600  
City-State-Zip: ORLANDO FL 32809

Title TD  
Name FARIA, WEDER  
Address 6220 S ORANGE BLOSSOM TRL  
SUITE 600  
City-State-Zip: ORLANDO FL 32809

*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:** VANUE ANTONIO DA SILVA FARIA

PD

03/14/2015

Electronic Signature of Signing Officer/Director Detail

Date