

**2015 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P14000003493

**Entity Name:** BACORVE USA INC.

**Current Principal Place of Business:**

7001 BISCAYNE BLVD  
2ND FLOOR  
MIAMI, FL 33138

**FILED**  
**Apr 29, 2015**  
**Secretary of State**  
**CC3286159272**

**Current Mailing Address:**

7001 BISCAYNE BLVD  
2ND FLOOR  
MIAMIA, FL 33138 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

HARALSON, PAUL  
7001 BISCAYNE BLVD  
2ND FLOOR  
MIAMI, FL 33138 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: PAUL HARALSON**

**04/29/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name ZAPATA, ALBERTO  
Address C/O 2727 ALLEN PARKWAY SUITE  
1700  
City-State-Zip: HOUSTON TX 77019

Title S  
Name ZAPATA, RODOLFO  
Address C/O 2727 ALLEN PARKWAY SUITE  
1700  
City-State-Zip: HOUSTON TX 77019

Title D  
Name ZAPATA, RODOLFO  
Address C/O 2727 ALLEN PARKWAY SUITE  
1700  
City-State-Zip: HOUSTON TX 77019

Title VP  
Name CRUZ, RAYMUNDO  
Address C/O 2727 ALLEN PARKWAY SUITE  
1700  
City-State-Zip: HOUSTON TX 77019

Title VP  
Name MAGANA, MARTIN B  
Address C/O 2727 ALLEN PARKWAY SUITE  
1700  
City-State-Zip: HOUSTON TX 77019

*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: RODOLFO ZAPATA**

**DIRECTOR**

**04/29/2015**

Electronic Signature of Signing Officer/Director Detail

Date