# 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000048950

Entity Name: MAVEFS BRICKELL, CORP.

### **Current Principal Place of Business:**

8081 NW 74TH STREET MEDLEY, FL 33166

### **Current Mailing Address:**

8081 NW 74TH STREET MEDLEY, FL 33166 US

## FEI Number: 38-3935327

### Name and Address of Current Registered Agent:

GOVANTES, CARLOS 8081 NW 74 STREET MEDLEY, FL 33166 US

FILED Jan 26, 2016 Secretary of State CC3143421651

Certificate of Status Desired: No

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                     | Р  | Title           | D                         |      |
| Name                      | MAVROKORDATOS, EFSTATHIOS                | Name            | MAVROKORDATOS, EFSTATHIOS |      |
| Address                   | 55 SE 6 STREET, UNIT 4303                | Address         | 55 SE 6 STREET, UNIT 4303 |      |
| City-State-Zip:           | MIAMI FL 33131                           | City-State-Zip: | MIAMI FL 33131            |      |
| Title                     | S  |                 |                           |      |
| Name                      | MAVROKORDATOS, EFSTATHIOS                |                 |                           |      |
| Address                   | 55 SE 6 STREET, UNIT 4303                |                 |                           |      |
| 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: EFSTATHIOS MAVROKORDATOS

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Electronic Signature of Signing Officer/Director Detail