

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000049116

**Entity Name:** SHAWSHANK LOGISTICS & SUPPLIES INC.

**Current Principal Place of Business:**

8901 SW 157 AVENUE, #16-161  
MIAMI, FL 33196

**Current Mailing Address:**

8901 SW 157 AVENUE, #16-161  
MIAMI, FL 33196 US

**FEI Number: 47-1062043**

**Certificate of Status Desired: No**

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

CARRENO-CASANAS, ANDRES  
8901 SW 157 AVENUE, #16-146  
MIAMI, FL 33196 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

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title P  
Name MEDINA MARVAL, ANIBAL  
Address 8901 SW 157 AVENUE, #16-161  
City-State-Zip: MIAMI FL 33196

Title VP  
Name NUNEZ-RODRIGUEZ, SALVADOR  
Address 8901 SW 157 AVENUE, #16-161  
City-State-Zip: MIAMI FL 33196

Title D  
Name CARRENO-CASANAS, ANDRES  
Address 8901 SW 157 AVENUE, #16-161  
City-State-Zip: MIAMI FL 33196

Title D  
Name ZAMBRANO-VILLALOBOS, CARLOS  
JOSE  
Address 8901 SW 157 AVENUE, #16-161  
City-State-Zip: MIAMI FL 33196

*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: ANIBAL MEDINA MARVAL**

**P**

**04/21/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date