#### 2015 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

#### DOCUMENT# P14000078190

Entity Name: ELBRUS MANAGEMENT TWO INC.

# **Current Principal Place of Business:**

2950 SW 27TH AVENUE SUITE 220 MIAMI, FL 33133

## **Current Mailing Address:**

2950 SW 27TH AVENUE SUITE 220 MIAMI, FL 33133 US

## FEI Number: 47-2079634

## Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI 201 SOUTH BISCAYNE BLVD BLVD, STE 1500 (LAD) MIAMI, FL 33131 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	CEO	Title	PRESIDENT
	Name	HORWITZ, VIOLETA	Name	PERO, ALFONSO
	Address	2950 SW 27TH AVENUE SUITE 220	Address	2950 SW 27TH AVENUE SUITE 220
	City-State-Zip:	MIAMI FL 33133	City-State-Zip:	MIAMI FL 33133
	Title	VP	Title	DIRECTOR, TREASURER
	Name	ALLIENDE, CRISTIAN	Name	SOLARI, ANDRES
	Address	2950 SW 27TH AVENUE SUITE 220	Address	2950 SW 27TH AVENUE SUITE 220
	City-State-Zip:	MIAMI FL 33133	City-State-Zip:	MIAMI FL 33133
	Title	SECRETARY	Title	VP
	Name	DE ARMAS, LUIS A.	Name	CABELLO, EDUARDO
	Address	201 SOUTH BISCAYNE BLVD BLVD, STE 1500	Address	2950 SW 27TH AVENUE SUITE 220
	City-State-Zip:	(LAD) MIAMI FL 33131	City-State-Zip:	MIAMI FL 33133

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.

SECRETARY

## SIGNATURE: LUIS A. DE ARMAS

Electronic Signature of Signing Officer/Director Detail

# FILED Jul 01, 2015 Secretary of State CC6462293974

Certificate of Status Desired: No

Date