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: NAPOLEAO FERNANDEZ

Electronic Signature of Signing Officer/Director Detail

Entity Name: FAMILYES NETWORK INC Current Principal Place of Business:

95 MERRICK WAY 3RD FLOOR CORAL GABLES, FL 33134

DOCUMENT# P15000001608

Current Mailing Address:

95 MERRICK WAY, 3RD FLOOR CORAL GABLES, FL 33134 US

FEI Number: 47-2736131

Name and Address of Current Registered Agent:

FERNANDEZ, NAPOLEAO 95 MERRICK WAY - 3RD FLOOR CORAL GABLES, FL 33134 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.

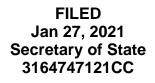
SIGNATURE:

Electronic Signature of Registered Agent

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Officer/Director Detail :

Title	Ρ	Title	Т
Name	MEDINA, VILMA H	Name	FERNANDEZ, NAPOLEAO
Address	95 MERRICK WAY 3RD FLOOR	Address	95 MERRICK WAY 3RD FLOOR
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134



Certificate of Status Desired: No

TREASURER

01/27/2021 Date

Date