

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000046416

**FILED  
Apr 29, 2016  
Secretary of State  
CC1376431318**

**Entity Name:** BETSY'S DELICIAS AND SUPPLY INC.

**Current Principal Place of Business:**

15631 NW 52ND AVE  
APT 201  
MIAMI GARDENS, FL 33014

**Current Mailing Address:**

15631 NW 52ND AVE  
APT 201  
MIAMI GARDENS, FL 33014 US

**FEI Number: 81-1982548**

**Certificate of Status Desired: No**

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

MARTINEZ, BETSAIDA P  
15631 NW 52ND AVE  
APT 201  
MIAMI GARDENS, FL 33014 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 MARTINEZ, BETSAIDA  
Address 15631 NW 52ND AVE  
City-State-Zip: MIAMI GARDENS FL 33014

Title VP  
Name MARTINEZ, ANDRES  
Address 15631 NW 52ND AVE  
City-State-Zip: MIAMI GARDENS FL 33014

Title SECRETARY  
Name MARTINEZ, ANDREINA  
Address 15631 NW 52ND AVE  
City-State-Zip: MIAMI GARDENS FL 33014

Title TREASURER  
Name MARTINEZ , ANDRISSELL PAHOLA  
Address 15631 NW 52 AVE # 201  
City-State-Zip: MIAMI GARDENS FL 33014

Title DIRECTOR  
Name MARTINEZ, ANDRIELLA MARIA  
Address 15631 NW 52 AVE # 201  
City-State-Zip: MIAMI GARDENS FL 33014

*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: BETSAIDA MARTINEZ**

**PRESIDENT**

**04/29/2016**

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

\_\_\_\_\_  
Date