

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000100379

**Entity Name:** ELBRUS MANAGEMENT SIX INC.**Current Principal Place of Business:**2950 S.W. 27TH AVE., STE. 220  
MIAMI, FL 33133**Current Mailing Address:**2950 S.W. 27TH AVE., STE. 220  
MIAMI, FL 33133 US**FEI Number:** 81-0906497**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION COMPANY OF MIAMI  
200 SOUTH BISCAYNE BOULEVARD  
SUITE 4100 (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

Date

**Officer/Director Detail :**

Title CEO  
Name HORWITZ, VIOLETA  
Address 2950 S.W. 27TH AVE., STE. 220  
City-State-Zip: MIAMI FL 33133

Title P  
Name PERO, ALFONSO  
Address 2950 S.W. 27TH AVE., STE. 220  
City-State-Zip: MIAMI FL 33133

Title VP  
Name ALLIENDE, CRISTIAN  
Address 2950 S.W. 27TH AVE., STE. 220  
City-State-Zip: MIAMI FL 33133

Title VP  
Name GANA, RODRIGO  
Address 2950 S.W. 27TH AVE., STE. 220  
City-State-Zip: MIAMI FL 33133

Title DT  
Name SOLARI URQUIETA, ANDRES  
Address 2950 S.W. 27TH AVE., STE. 220  
City-State-Zip: MIAMI FL 33133

Title S  
Name DE ARMAS, LUIS A  
Address 200 SOUTH BISCAYNE BOULEVARD  
SUITE 4100  
City-State-Zip: MIAMI FL

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:** DE ARMAS , LUIS A.**SECRETARY****01/20/2017**

Electronic Signature of Signing Officer/Director Detail

Date