

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000041581

**Entity Name:** LAMAS PINTO GROUP CORP

**Current Principal Place of Business:**

4700 MILLENIA BOULEVARD  
SUITE 175  
ORLANDO, FL 32839

**Current Mailing Address:**

4700 MILLENIA BOULEVARD  
SUITE 175  
ORLANDO, FL 32839 US

**FEI Number:** 81-2612834

**Certificate of Status Desired:** No

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

PINTO, SOCRATES S  
4700 MILLENIA BOULEVARD  
SUITE 175  
ORLANDO, FL 32839 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 PINTO, SOCRATES S  
Address 4700 MILLENIA BOULEVARD  
City-State-Zip: ORLANDO FL 32839

Title VP  
Name PINTO, MARIA JOSE  
Address 4700 MILLENIA BOULEVARD  
City-State-Zip: ORLANDO FL 32839

Title TRES  
Name PINTO, MARIA JOSE  
Address 4700 MILLENIA BOULEVARD  
City-State-Zip: ORLANDO FL 32839

Title SEC  
Name PINTO, SOCRATES S  
Address 4700 MILLENIA BOULEVARD  
City-State-Zip: ORLANDO FL 32839

Title VP  
Name PINTO, JACINTO  
Address 590 MADISON AVENUE  
City-State-Zip: NEW YORK NY 10022

*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:** SOCRATES PINTO

**PRES**

**04/30/2017**

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

\_\_\_\_\_  
Date