

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000100522

**FILED**  
**Apr 12, 2018**  
**Secretary of State**  
**CC0875168105**

**Entity Name:** DOMMUS INVERHOUSE CORP

**Current Principal Place of Business:**

6303 BLUE LAGOON DR.  
SUITE 320  
MIAMI, FL 33126

**Current Mailing Address:**

6303 BLUE LAGOON DR.  
SUITE 320  
MIAMI, FL 33126 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MLP FINANCIAL GROUP INC  
6303 BLUE LAGOON DR.  
SUITE 320  
MIAMI, FL 33126 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            PRESIDENT/D  
Name            HERNANDEZ, OCTAVIO E  
Address        6303 BLUE LAGOON DR. STE 320  
City-State-Zip: MIAMI FL 33126

Title            VP/D  
Name            HERNANDEZ ROSILLO, JAVIER E.  
Address        6303 BLUE LAGOON DR.  
                 SUITE 320  
City-State-Zip: MIAMI FL 33126

Title            TREASURER/D  
Name            ROSILLO GALUE, CARLI C.  
Address        6303 BLUE LAGOON DR.  
                 SUITE 320  
City-State-Zip: MIAMI FL 33126

*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:** OCTAVIO E. HERNANDEZ

**P**

**04/12/2018**

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

\_\_\_\_\_  
Date