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:	MIGUEL CAMONES			03/06/2020
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	Ρ	Title	D	
Name	MONTES, MANUEL	Name	CAMONES, MIGUEL	
Address	8249 NW 36TH STREET SUITE 211	Address	8249 NW 36TH STREET SUITE 2	211

City-State-Zip: DORAL FL 33166

PRESIDENT

2441 NW 93RD AVE

Name and Address of Current Registered Agent:

2441 NW 93RD AVE SUITE 103

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000023736

Entity Name: MICATON USA CORPORATION

Current Principal Place of Business:

DORAL, FL 33172

Current Mailing Address:

SUITE 103 DORAL, FL 33172

FEI Number: 82-0839132

M&C ACCOUNTING SERVICES 8249 NW 36TH STREET SUITE 211 DORAL, FL 33166 US

City-State-Zip: DORAL FL 33166

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: MANUEL MONTES

Electronic Signature of Signing Officer/Director Detail

FILED Mar 06, 2020 Secretary of State 8865911649CC

Certificate of Status Desired: No

03/06/2020