## 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000071396

Entity Name: EDUZZ CORP

**Current Principal Place of Business:** 

299 ALHAMBRA CIR SUITE 403

CORAL GABLES, FL 33134

**Current Mailing Address:** 

299 ALHAMBRA CIR SUITE 403

CORAL GABLES, FL 33134 US

FEI Number: 84-3102675 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARIBROS LLC 299 ALHAMBRA CIR SUITE 403

CORAL GABLES, FL 33134 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

**FILED** Feb 06, 2020

**Secretary of State** 

8979365226CC

Officer/Director Detail:

Title Title Т

PACHELLE M. DA COSTA, EUGENIO PACHELLE M. DA COSTA, EUGENIO Name Name

RUA OSMAR MONTANHAM, 101, RUA OSMAR MONTANHAM, 101, Address Address

CASA 23 CASA 23

City-State-Zip: SOROCABA SP 01804-6 City-State-Zip: SOROCABA SP 01804-6

Title D Title D

Name PACHELLE M. DA COSTA, EUGENIO Name SANTOS, CLEBER

Address RUA OSMAR MONTANHAM, 101, Address 299 ALHAMBRA CIR - SUITE 403

CASA 23

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: SOROCABA OC

Title MGR Title S

Name KARAM, ALVARO **CARIBROS LLC** Name

Address 299 ALHAMBRA CIR - SUITE 403 299 ALHAMBRA CIR - SUITE 403 Address

CORAL GABLES FL 33134 City-State-Zip: City-State-Zip: CORAL GABLES FL 33134

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.

02/06/2020 SIGNATURE: ALVARO KARAM **MGR**