

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000076018

Entity Name: LA ONE USA, INC.

Current Principal Place of Business:

16711 COLLINS AVENUE
SUITE 1601
SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

17501 BISCAYNE BLVD.
SUITE 400
AVENTURA, FL 33160

FEI Number: 84-3324639

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOCKING, JUAN ALBERTO
17501 BISCAYNE BLVD.
SUITE 400
AVENTURA, FL 33160 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 PD
Name VIVO, ANDREINA MARIA
Address 16711 COLLINS AVENUE
SUITE 1601
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title VPD
Name BOCKING, JUAN ALBERTO
Address 16711 COLLINS AVENUE
SUITE 1601
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title DIRECTOR
Name BOCKING VIVO, ANDREINA MARIA
Address 16711 COLLINS AVENUE
SUITE 1601
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title DIRECTOR
Name BOCKING VIVO, ALBERTO JUAN
Address 16711 COLLINS AVENUE
SUITE 1601
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title DIRECTOR
Name BOCKING VIVO, MARIA
Address 16711 COLLINS AVENUE
SUITE 1601
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title DIRECTOR
Name BOCKING VIVO, RODRIGO
Address 16711 COLLINS AVENUE
SUITE 1601
City-State-Zip: SUNNY ISLES BEACH FL 33160

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: ANDREINA MARIA VIVO

PRESIDENT

02/25/2020

Electronic Signature of Signing Officer/Director Detail

Date