

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000040775

**Entity Name:** AGROPECUARIA CARINCO SA CORP

**Current Principal Place of Business:**

2045 BISCAYNE BLVD  
STE 327  
MIAMI, FL 33137

**Current Mailing Address:**

2045 BISCAYNE BLVD  
STE 327  
MIAMI, FL 33137 US

**FEI Number:** 86-3851557

**Certificate of Status Desired:** No

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

YORDE, MARWAN R  
2045 BISCAYNE BLVD  
STE 327  
MIAMI, FL 33137 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                             | Title           | VP                            |
| Name            | YORDE, MARWAN R               | Name            | ELORRIAGA, MIKEL              |
| Address         | 2045 BISCAYNE BLVD<br>STE 327 | Address         | 2045 BISCAYNE BLVD<br>STE 327 |
| City-State-Zip: | MIAMI FL 33137                | City-State-Zip: | MIAMI FL 33137                |

*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:** YORDE , MARWAN R

**PRESIDENT**

**04/21/2023**

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

\_\_\_\_\_  
Date