

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000047861

**Entity Name:** TEYCA, INC.

**Current Principal Place of Business:**

C/O GEOFFREY M. WAYNE, P.A.  
135 SAN LORENZO AVENUE, PH 840  
CORAL GABLES, FL 33146

**Current Mailing Address:**

C/O GEOFFREY M. WAYNE, P.A.  
135 SAN LORENZO AVENUE, PH 840  
CORAL GABLES, FL 33146 US

**FEI Number:** 75-0658379

**Certificate of Status Desired:** No

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

WAYNE, GEOFFREY MPA  
135 SAN LORENZO AVENUE  
PH 840  
CORAL GABLES, FL 33146 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            D  
Name            BETANCOURT MATA, CARLOS A  
Address        PO BOX 4009  
City-State-Zip: DEERFIELD BEACH FL 33442-4009

Title            D  
Name            DE BETANCOURT, IVONNE M  
Address        PO BOX 4009  
City-State-Zip: DEERFIELD BEACH FL 33442-4009

*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:** CARLOS A BETANCOURT MATA

D

01/16/2017

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

\_\_\_\_\_  
Date