

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000067183

**Entity Name:** MATIOK, INC.**Current Principal Place of Business:**600 GRAPETREE DRIVE  
APT 10DN  
KEY BISCAYNE, FL 33149**Current Mailing Address:**7801 NW 37TH ST  
SECTION 1231 / GUA  
DORAL, FL 33166**FEI Number:** 65-0732626**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LOWMAN, ROBERT MPA  
2730 SW 3RD AVE  
SUITE 800  
MIAMI, FL 33129 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 CASTILLO DE MATA, MARIA LUISA  
Address DIAGONAL 6, 10-01 ZONA 10  
1002A  
City-State-Zip: GUATEMALA GUATEMALA 01010

Title DR  
Name MATA C, GUILLERMO  
Address DIAGONAL 6, 10-01 ZONA 10  
1002A  
City-State-Zip: GUATEMALA GUATEMALA 01010

Title DR  
Name MATA C, ESTUARDO  
Address DIAGONAL 6, 10-01 ZONA 10  
1002A  
City-State-Zip: GUATEMALA GUATEMALA 01010

Title MRS  
Name MATA DE ARIAS, LUISA MARIA  
Address DIAGONAL 6, 10-01 ZONA 10  
1002A  
City-State-Zip: GUATEMALA GUATEMALA 01010

Title MR  
Name MATA C, CARLOS ENRIQUE  
Address DIAGONAL 6, 10-01 ZONA 10  
1002A  
City-State-Zip: GUATEMALA GUATEMALA 01010

Title MRS  
Name MATA, ANA ISABEL  
Address DIAGONAL 6, 10-01 ZONA 10  
1002A  
City-State-Zip: GUATEMALA GUATEMALA 01010

Title MRS  
Name MATA, GRACIELA M  
Address DIAGONAL 6, 10-01 ZONA 10  
1002A  
City-State-Zip: GUATEMALA GUATEMALA 01010

*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:** FEDERICO ESTUARDO MATA CASTILLO

03/02/2014

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