

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000089428

**Entity Name:** WRAPIDO CORPORATION

**Current Principal Place of Business:**

2614 PONCE DE LEON BLVD PH1  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2614 PONCE DE LEON BLVD  
PH #1  
CORAL GABLES, FL 33134 US

**FEI Number:** 65-0707399

**Certificate of Status Desired:** Yes

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

NG, ABE  
8005 NW 90 ST.  
MIAMI, FL 33166 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 PDST  
Name NG, ABE  
Address 8005 NW 90 ST  
City-State-Zip: MIAMI FL 33166

Title MGRM  
Name NG, IVA  
Address 8005 NW 90 STREET  
City-State-Zip: MEDLEY FL 33166

Title MGRM  
Name NG, ALLAN  
Address 2614 PONCE DE LEON BLVD  
PH #1  
City-State-Zip: CORAL GABLES FL 33134

Title MGRM  
Name NG, BETTY  
Address 2614 PONCE DE LEON BLVD  
PH #1  
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.*

**SIGNATURE:** IVA NG

MGRM

03/24/2017

Electronic Signature of Signing Officer/Director Detail

Date