

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V51311

**Entity Name:** UNITED AMERICAN CORP**Current Principal Place of Business:**5201 BLUE LAGOON DR  
SUITE 800  
MIAMI, FL 33126**Current Mailing Address:**5201 BLUE LAGOON DR  
SUITE 800  
MIAMI, FL 33126 US**FEI Number:** 81-0850882**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS RD. #221E  
PALM BEACH GARDENS, FL 33410 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:** CORPORATE CREATIONS NETWORK INC.

04/30/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name LALIBERTE, BENOIT  
Address 5201 BLUE LAGOON DR  
SUITE 800  
City-State-Zip: MIAMI FL 33126

Title DIRECTOR  
Name COTE, JOSEPH  
Address 5201 BLUE LAGOON DR  
City-State-Zip: MIAMI FL 33126

Title DIRECTOR  
Name SCHMIDT, MICHAEL  
Address 5201 BLUE LAGOON DR  
SUITE 800  
City-State-Zip: MIAMI FL 33126

Title PVST  
Name LALIBERTE, BENOIT  
Address 5201 BLUE LAGOON DR  
SUITE 800  
City-State-Zip: MIAMI FL 33126

Title DIRECTOR  
Name GOLD, RONALD  
Address 5201 BLUE LAGOON DR  
SUITE 800  
City-State-Zip: MIAMI FL 33126

Title DIRECTOR  
Name TREVOR-DEUTSCH, LAWRY  
Address 5201 BLUE LAGOON DR  
SUITE 800  
City-State-Zip: MIAMI FL 33126

*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:** BENOIT LALIBERTE**PRESIDENT**

04/30/2019

Electronic Signature of Signing Officer/Director Detail

Date