2015 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L13000149390

Entity Name: VISTA LATINA TECHNOLOGIES, LLC

FILED Oct 16, 2015 Secretary of State CC8924667364

Current Principal Place of Business:

2655 S LE JEUNE ROAD

522

CORAL GABLES, FL 33134

Current Mailing Address:

2655 S. LE JEUNE ROAD

522

CORAL GABLES, FL 33134 US

FEI Number: 80-0957481 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

URDANETA, JUAN VICENTE 2655 S. LE JEUNE ROAD 522

CORAL GABLES, FL 33134 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: JUAN VICENTE URDANETA 10/16/2015

> Date Electronic Signature of Registered Agent

> > Title

Authorized Person(s) Detail:

Title MGR Title MGR

Name MORALES, DARWIN Name DAVILA, JORDAN

Address URB.CUMBRES DE MONTE ALEGRE Address URB. LA UNION DEL HATILLO

I,TH18 TAZAJAL

City-State-Zip: CARACAS, VENEZUELA OC 00000 VALENCIA, CARABOBO, VENEZUELA City-State-Zip:

OC 00000

AUTHORIZED MEMBER Title **AUTHORIZED MEMBER** Name GEMINA TECH, S.A.

SEALARK INVESTMENTS S.A. Name AVENIDA CINCUENTENARIA Address

RESIDENCIAS BAHIA DEL GOLF, APT Address URBANIZACION LA UNION DEL 31-A

HATILLO

City-State-Zip: **PANAMA** City-State-Zip: CARACAS CARACAS

Title AUTHORIZED MEMBER Title AUTHORIZED MEMBER

PLUSDALE CORP Name Name MAIDA OVERSEAS, S.A.

MULTICENTRO DEL ESTE, AVENIDA Address AVENIDA SAN JUAN BOSCO, Address

LIBERTADOR RESIDENCIAS 717

NUCLEO A, PISO 3, OFICINA A33 PB-B. ALTAMIRA

City-State-Zip: CHACAO CARACAS City-State-Zip: CARACAS CARACAS

Title AUTHORIZED MEMBER Title MANAGER Name MARTINEZ, KLEYVERT Name TILAC, CARLOS

Address URBANIZACIÓN LA PAZ Address AVENIDA CINCUENTENARIA

CALLE AYACUCHO, EDIF SAY PARK II RESIDENCIAS BAHIA DEL GOLF #31-

PISO 6, APT 61

CARACAS CARACAS City-State-Zip: PANAMA City-State-Zip:

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that the information indicated on this report or supplemental report is true and accurate and that the information indicated on this report or supplemental report is true and accurate and that the information indicated on this report or supplemental report is true and accurate and that the information indicated on this report or supplemental report is true and accurate and that the information indicated on this report or supplemental report is true and accurate and that the information indicated on this report or supplemental report is true and accurate and that the information indicated on this report or supplemental report is true and accurate and that the information indicated on this report or supplemental report is true and accurate and the information supplemental report is true and accurate and the information indicated on this report or supplemental report is true and accurate and the information indicated on this report of the information indicated in the information in the information in the information indicated in the information in the oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

10/16/2015 **MGR** SIGNATURE: CARLOS TILAC

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued:

Title **AUTHORIZED MEMBER** Title **AUTHORIZED MEMBER** TILAC, CARLOS Name MORALES, DARWIN Name

Address 2655 S. LE JEUNE ROAD, SUITE 522 Address 2655 S. LE JEUNE ROAD

SUITE 522 City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title **AUTHORIZED MEMBER**

AUTHORIZED MEMBER Title Name DAVILA, JORDAN Name DAVILA, JOSE

2655 S. LE JEUNE ROAD Address Address 2655 S. LE JEUNE ROAD SUITE 522

SUITE 522

City-State-Zip: CORAL GABLES FL 33134 CORAL GABLES FL 33134 City-State-Zip:

Title **AUTHORIZED MEMBER** Title **AUTHORIZED MEMBER**

RODRIGUEZ, LAURA Name MONTILVA, RENE Name 2655 S. LE JEUNE ROAD Address

Address 2655 S. LE JEUNE ROAD SUITE 522

SUITE 522 CORAL GABLES FL 33134

City-State-Zip: City-State-Zip: CORAL GABLES FL 33134

Title AUTHORIZED MEMBER Title **AUTHORIZED MEMBER** Name SALAZAR, OSWALDO

Name CARO, LENNIN Address 2655 S. LE JEUNE ROAD

Address 2655 S. LE JEUNE ROAD SUITE 522

SUITE 522 City-State-Zip: CORAL GABLES FL 33134

CORAL GABLES FL 33134 City-State-Zip: