#### 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000149390

Entity Name: VISTA LATINA TECHNOLOGIES, LLC

## **Current Principal Place of Business:**

AV CINCUENTENARIA, RES. BAHIA DEL GOLF APT. 31A PANAMA, PANAMA, OC 00000

## **Current Mailing Address:**

C/O ABSOLUTE ACCOUNTING 4801 S UNIVERSITY DRIVE, SUITE 272 DAVIE, FL 33328 US

## FEI Number: 80-0957481

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

ABSOLUTE ACCOUNTING 4801 S UNIVERSITY DRIVE 272 DAVIE, FL 33328 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

#### Authorized Person(s) Detail :

Authorized Person(s) Detail :			
Title	MGR	Title	MGR
Name	TILAC, CARLOS	Name	MORALES, DARWIN
Address	AV CINCUENTENARIA, RES.BAHIA DEL GOLF, 31A	Address	URB.CUMBRES DE MONTE ALEGRE I,TH18 TAZAJAL
City-State-Zip:	PANAMA, PANAMA OC 00000	City-State-Zip:	VALENCIA,CARABOBO,VENEZUELA OC 00000
Title	MGR		
Name	DAVILA, JORDAN		
Address	URB. LA UNION DEL HATILLO		
City-State-Zip:	CARACAS, VENEZUELA OC 00000		

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 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.

## SIGNATURE: CARLOS TILAC

PRESIDENT

04/25/2014 Date

Date

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Apr 25, 2014 Secretary of State CC6688959770

Certificate of Status Desired: No