

**2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000004298

**FILED**  
**Jan 30, 2014**  
**Secretary of State**  
**CC4936238506**

**Entity Name:** FIDEC CORPORATION

**Current Principal Place of Business:**

2050 CORAL WAY STE 407  
MIAMI, FL 33145

**Current Mailing Address:**

9100 S DADELAND BLVD STE 912  
MIAMI, FL 33156

**FEI Number:** 13-4186589

**Certificate of Status Desired:** No

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

PIEDRA & COMPANY CPA PA  
9100 S DADELAND BLVD STE 912  
MIAMI, FL 33156 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 CP  
Name STAMBOULIAN, DANIEL MD  
Address 2050 CORAL WAY STE 407  
City-State-Zip: MIAMI FL 33145

Title VCP  
Name ARDUINO, ROBERTO MD  
Address 2050 CORAL WAY STE 407  
City-State-Zip: MIAMI FL 33145

Title S  
Name ROTHOLC, VALERIA  
Address 2050 CORAL WAY STE 407  
City-State-Zip: MIAMI FL 33145

Title T  
Name STAMBOULIAN, ROXANA  
Address 2050 CORAL WAY STE 407  
City-State-Zip: MIAMI FL 33145

Title D  
Name GURTMAN, ALEJANDRA MD  
Address 2050 CORAL WAY STE 407  
City-State-Zip: MIAMI FL 33145

Title D  
Name KOHL, STEVE  
Address 2050 CORAL WAY STE 407  
City-State-Zip: MIAMI FL 33145

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** STAMBOULIAN DANIEL MD

CP

01/30/2014

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

\_\_\_\_\_ Date