

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000000520

**Entity Name:** BACARDI BUSINESS SOLUTIONS, INC.

**Current Principal Place of Business:**

2701 LE JEUNE ROAD  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2701 LE JEUNE ROAD  
CORAL GABLES, FL 33134 US

**FEI Number:** 27-1628669

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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            PRESIDENT  
Name            FANJUL, ROBERTO CARLOS D  
Address        2701 LE JEUNE ROAD  
City-State-Zip: CORAL GABLES FL 33134

Title            ASSISTANT VICE PRESIDENT &  
                  TREASURER  
Name            RODRIGUEZ, JORGE  
Address        2701 LE JEUNE ROAD  
City-State-Zip: CORAL GABLES FL 33134

Title            VP, HUMAN RESOURCES  
Name            THOMAS, STACIE  
Address        2701 LE JEUNE ROAD  
City-State-Zip: CORAL GABLES FL 33134

Title            SECRETARY  
Name            PROHIAS, RAFAEL  
Address        2701 LE JEUNE ROAD  
City-State-Zip: CORAL GABLES FL 33134

Title            ASSISTANT SECRETARY  
Name            HENDRIX, JULIE  
Address        2701 LE JEUNE ROAD  
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:** JULIE HENDRIX

**GLOBAL TAX DIRECTOR      04/28/2014**

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

\_\_\_\_\_ Date