

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000002572

**Entity Name:** CLICLOGIX AMERICAS INC.

**Current Principal Place of Business:**

400 NW 26TH ST  
MIAMI, FL 33127

**FILED**  
**Jul 31, 2015**  
**Secretary of State**  
**CC8370282796**

**Current Mailing Address:**

400 NW 26TH ST  
APT. 61  
MIAMI, FL 33127 US

**FEI Number:** 45-2476421

**Certificate of Status Desired:** No

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

BONNELLY, RAFAEL  
400 NW 26TH ST  
MIAMI, FL 33127 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	CVPT	Title	DP
Name	COEN, OSCAR	Name	BONNELLY, RAFAEL
Address	400 NW 26TH ST	Address	400 NW 26TH ST
City-State-Zip:	MIAMI FL 33127	City-State-Zip:	MIAMI FL 33127

Title S  
Name CASILLAS, MARK  
Address 8 BARTEL COURT,  
City-State-Zip: TIBURON CA 94920

*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:** RAFAEL BONNELLY

**CEO**

**07/31/2015**

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

\_\_\_\_\_  
Date