

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000003176

Entity Name: FORZA LIEN, INC.

Current Principal Place of Business:

401 E LAS OLAS BLVD, STE 1650
FORT LAUDERDALE, FL 33301

Current Mailing Address:

401 E LAS OLAS BLVD, STE 1650
FORT LAUDERDALE, FL 33301

FEI Number: 45-5577153

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS RD #221E
PALM BEACH GARDENS, FL 33410 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 MCFADDEN, MICHAEL
Address 401 E LAS OLAS BLVD, STE 1650
City-State-Zip: FORT LAUDERDALE FL 33301

Title ASST. SECRETARY
Name DAVIS, KIMBERLY
Address 401 E LAS OLAS BLVD, STE 1650
City-State-Zip: FORT LAUDERDALE FL 33301

Title TREASURER
Name RIVERA, ELVIS
Address 401 E LAS OLAS BLVD, STE 1650
City-State-Zip: FORT LAUDERDALE FL 33301

Title SECRETARY
Name CREWS, BETH A
Address 401 E LAS OLAS BLVD, STE 1650
City-State-Zip: FORT LAUDERDALE FL 33301

Title DIRECTOR
Name HALTER, PAUL V
Address 401 E LAS OLAS BLVD, STE 1650
City-State-Zip: FORT LAUDERDALE FL 33301

Title DIRECTOR
Name MEADOWS, LISA
Address 401 E LAS OLAS BLVD, STE 1650
City-State-Zip: FORT LAUDERDALE FL 33301

Title DIRECTOR
Name RICHARDSON, GEX
Address 401 E LAS OLAS BLVD, STE 1650
City-State-Zip: FORT LAUDERDALE FL 33301

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: BETH A CREWS

SECRETARY

04/05/2016

Electronic Signature of Signing Officer/Director Detail

Date