#### 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. 04/28/2016

SIGNATURE: THAMARA PEREZ Electronic Signature of Signing Officer/Director Detail

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

PEREZ, THAMARA 7005 W. 17TH CT. HIALEAH, FL 33014 US

### SIGNATURE:

Electronic Signature of Registered Agent

### **Officer/Director Detail :**

Title D Name PEREZ, THAMARA Address 7005 W. 17TH CT. City-State-Zip: HIALEAH FL 33014

DIRECTOR

PETROSID LIMITADA, INC **Current Principal Place of Business:** 

Entity Name: SERVICIOS Y EQUIPOS DE AUTOMATIZACION Y CONTROL

4401 COLLINS AVENUE, APT. 1411 MIAMI BEACH, FL 33140

## **Current Mailing Address:**

4401 COLLINS AVENUE, APT. 1411 MIAMI BEACH, FL 33140

# FEI Number: NOT APPLICABLE

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.

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

# Apr 28, 2016 Secretary of State CC7303387265

FILED

Certificate of Status Desired: No

Date

Date