

**2022 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F20000005663

**FILED**  
**Jun 14, 2022**  
**Secretary of State**  
**7447480079CC**

**Entity Name:** E. LEON JIMENES MANAGEMENT, S.A. CO.

**Current Principal Place of Business:**

PH ARIFA 9TH AND 10TH FLOORS WEST BLVD  
SANTA MARIA BUSINESS DISTRICT  
PANAMA,

**Current Mailing Address:**

PH ARIFA 9TH AND 10TH FLOORS WEST BLVD  
SANTA MARIA BUSINESS DISTRICT  
PANAMA, PA

**FEI Number:** 98-1582291

**Certificate of Status Desired:** No

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

GASTESI, RAUL  
8105 NW 155 STREET  
MIAMI LAKES, FL 33016 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 CHAIRMAN, DIR  
Name AGUAYO SALADIN, JORGE RAFAEL  
Address ANACAONA AVE NO 23  
NARAGUA III TOWER LOS  
CACICAZGOS  
City-State-Zip: SANTO DOMINGO

Title VICE CHAIRMAN, DIR  
Name BAHAMON FALLA, NICOLAS  
Address CARRERA 8 NO 83-72 9TH FLOOR  
City-State-Zip: BOGOTA

Title SECRETARY, DIR  
Name LEON NOUEL, CARLOS GUILLERMO  
Address RAFAEL HERNANDEZ STREET NO 9  
MONTEVERDI TOWER 7TH FLOOR  
ENSANCHE NACO  
City-State-Zip: SANTO DOMINGO

Title DIR  
Name AMORE, GUILLERMO  
Address 8404 NW 64 ST  
City-State-Zip: MIAMI FL 33166

Title DIR  
Name TAVARES SANCHEZ, MANUEL  
ENRIQUE  
Address PEDRO HENRIQUEZ URENA AVE  
NO 103 LA ESPERILLA  
City-State-Zip: SANTO DOMINGO

Title CEO  
Name JORGE LEON, MARCOS JOSE  
Address ANACAONA AVE. NO. 31  
City-State-Zip: LOS CACICAZGOS SANTO DOMINGO

Title MANAGING DIRECTOR  
Name NIDO RIVERA, FERNANDO JAVIER  
Address 1581 BRICKELL AVE.  
APT. 302  
City-State-Zip: MIAMI FL 33129

Title DIR  
Name ALONZO, ALBERTO  
Address MONTE KAMERUN 145, INT. 1204,  
COL. LOMAS DE CHAPULTEPEC, DEL.  
MIGUEL HIDALGO  
C.P. 11910  
City-State-Zip: MEXICO

**Continues on page 2**

*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:** MARCOS JOSE JORGE LEON

**CEO**

**06/14/2022**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIR  
Name DUTRA, ANA  
Address 850 RIVER TRAIL  
City-State-Zip: VERO BEACH FL 32963