

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 469516

Entity Name: VEROIVON, INC.

Current Principal Place of Business:

ORIENTE PHARMACY
285 N.W. 27TH AVE
MIAMI, FL 33125

Current Mailing Address:

% DINORAH CARBALLOSA
2785 N.W. 3RD ST.
MIAMI, FL 33125-5013

FEI Number: 59-1611228

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARBALLOSA, DINORAH
2785 NW 3 ST
MIAMI, FL 33125 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 PS
Name CARBALLOSA, VERONICA
Address 2785 N.W. 3RD STREET
City-State-Zip: MIAMI FL

Title VT
Name CARBALLOSA, DINORAH
Address 2785 NW 3 ST
City-State-Zip: MIAMI FL

Title S
Name CARBALLOSA, VERONICA
Address 2785 N.W. 3RD STREET
City-State-Zip: MIAMI FL

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: VERONICA CARBALLOSA

PRESIDENT/SECRETARY 05/01/2016

Electronic Signature of Signing Officer/Director Detail

_____ Date