

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G13586

**Entity Name:** COLAMCO, INC.

**Current Principal Place of Business:**

224 W. CENTRAL PARKWAY  
SUITE 1006  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

224 W. CENTRAL PARKWAY  
SUITE 1006  
ALTAMONTE SPRINGS, FL 32714

**FEI Number:** 59-2246530

**Certificate of Status Desired:** No

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

SALDARRIAGA, JUAN G.  
1225 HARDMAN DRIVE  
ORLANDO, FL 32806 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	PD
Name	SALDARRIAGA, JUAN G
Address	1225 HARDMAN DRIVE
City-State-Zip:	ORLANDO FL 32806
Title	SD
Name	SALDARRIAGA, CAMILO A
Address	11200 LANE PARK RD
City-State-Zip:	TAVARES FL 32778

Title	TD
Name	SALDARRIAGA, DIEGO R
Address	2241 SOARING EAGLE PLACE
City-State-Zip:	LAKE MARY FL 32746
Title	D
Name	SALDARRIAGA, ALEJANDRO
Address	4000 WARDELL PLACE
City-State-Zip:	ORLANDO FL 32814

*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:** DIEGO R. SALDARRIAGA

**TREASURER**

**02/26/2016**

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

\_\_\_\_\_  
Date