

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000011549

**Entity Name:** E QUALCOM, CORP.

**Current Principal Place of Business:**

1960-4 N. COMMERCE PKWY  
WESTON, FL 33326

**Current Mailing Address:**

PO BOX 267033  
WESTON, FL 33326 US

**FEI Number:** 65-1074469

**Certificate of Status Desired:** No

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

NAVIA, LUIS  
15387 SW 38TH STREET  
DAVIE, FL 33331 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 VP  
Name NAVIA, LUIS  
Address PO BOX 267033  
City-State-Zip: WESTON FL 33326

Title VP  
Name NAVIA, MARIA C  
Address PO BOX 267033  
City-State-Zip: WESTON FL 33326

Title PD  
Name ARANGO, ANA  
Address PO BOX 267033  
City-State-Zip: WESTON FL 33326

Title VP  
Name NAVIA, DANIEL  
Address PO BOX 267033  
City-State-Zip: WESTON FL 33326

Title VP  
Name NAVIA, LUIS A  
Address PO BOX 267033  
City-State-Zip: WESTON FL 33326

*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:** LUIS NAVIA

VP

04/27/2014

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

\_\_\_\_\_  
Date