

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000109731

**Entity Name:** PALMETTO BAY CENTRE, INC.

**Current Principal Place of Business:**

15715 SOUTH DIXIE HIGHWAY  
203  
MIAMI, FL 33157

**Current Mailing Address:**

PO BOX 562863  
MIAMI, FL 33256-2863

**FEI Number:** 22-3877813

**Certificate of Status Desired:** No

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

SOCARRAS ATRIO, MARTHA  
15715 SOUTH DIXIE HIGHWAY  
203  
MIAMI, FL 33157 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 P  
Name SOCARRAS ATRIO, MARTHA  
Address 335 MARQUES DRIVE  
City-State-Zip: CORAL GABLES FL 33156

Title V  
Name ATRIO, JUSTO A  
Address 335 MARQUES DRIVE  
City-State-Zip: CORAL GABLES FL 33156

*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:** JUSTO A. ATRIO

V

03/16/2016

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

\_\_\_\_\_  
Date