

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000023460

Entity Name: ALTENEL, INC**Current Principal Place of Business:**815 NW 57 AVENUE
305
MIAMI, FL 33126**Current Mailing Address:**815 NW 57 AVENUE
305
MIAMI, FL 33126 US**FEI Number:** 90-0159868**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LIMA,RIOS & MARRERO,P.A.
815 NW 57 AVENUE
305
MIAMI, FL 33126 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	VILLEGAS, RAFAEL
Address	815 NW 57 AVENUE 305
City-State-Zip:	MIAMI FL 33126

Title	S
Name	CAMIL, ALFREDO V
Address	815 NW 57 AVENUE 305
City-State-Zip:	MIAMI FL 33126

Title	D
Name	CAMIL, LUISA FERNANDA V
Address	815 NW 57 AVENUE 305
City-State-Zip:	MIAMI FL 33126

Title	VP
Name	OLAVARRI DE VILLEGAS, MARIA EDURNE
Address	815 NW 57 AVENUE 305
City-State-Zip:	MIAMI FL 33126

Title	T
Name	CAMIL, MANUEL V
Address	815 NW 57 AVENUE 305
City-State-Zip:	MIAMI FL 33126

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: RAFAEL VILLEGAS

PS

04/24/2015

Electronic Signature of Signing Officer/Director Detail_____
Date