

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000164738

**Entity Name:** SOARES DA COSTA AMERICA, INC.

**Current Principal Place of Business:**

6205 BLUE LAGOON DRIVE  
SUITE 310  
MIAMI, FL 33126

**Current Mailing Address:**

6205 BLUE LAGOON DRIVE  
SUITE 310  
MIAMI, FL 33126 US

**FEI Number:** 20-1975543

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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 CFO, DIRECTOR  
Name FAUSTINO, LUIS M  
Address 6205 BLUE LAGOON DRIVE, SUITE  
310  
City-State-Zip: MIAMI FL 33126

Title CHAIRMAN, DIRECTOR  
Name HENRIQUES, ANTONIO C  
Address 6205 BLUE LAGOON DRIVE, SUITE  
310  
City-State-Zip: MIAMI FL 33126

Title DIRECTOR  
Name MENDES, JORGE G  
Address 6205 BLUE LAGOON DRIVE, SUITE  
310  
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:** LUIS M. FAUSTINO

**AUTHORIZED SIGNER**

**04/24/2014**

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

\_\_\_\_\_  
Date