

2013 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 | CEO, DIRECTOR |
| Name | ESTEVEZ, ANTONIO M |
| Address | 6205 BLUE LAGOON DRIVE, SUITE 310 |
| City-State-Zip: | MIAMI FL 33126 |

| | |
|-----------------|-----------------------------------|
| 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 | CHAIRMAN, DIRECTOR |
| Name | MENDES, JORGE G |
| Address | 6205 BLUE LAGOON DRIVE, SUITE 310 |
| City-State-Zip: | MIAMI FL 33126 |

| | |
|-----------------|----------------------------------|
| Title | VICE PRESIDENT |
| Name | CRAFT, THOMAS O. |
| 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

CFO

04/16/2013

Electronic Signature of Signing Officer/Director Detail_____
Date