

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000135225

Entity Name: PROTECCION PLENITUD, INC.

Current Principal Place of Business:

2393 SOUTH CONGRESS AV
WEST PALM BEACH, FL 33406

Current Mailing Address:

2393 SOUTH CONGRESS AV
WEST PALM BEACH, FL 33406 US

FEI Number: 20-3584629

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OQUENDO, JAIME
2393 SOUTH CONGRESS AV
WEST PALM BEACH, FL 33406 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 PD
Name OQUENDO, JAIME H
Address 2393 SOUTH CONGRESS AV
City-State-Zip: WEST PALM BEACH FL 33406

Title VPD
Name OQUENDO, MARIO
Address 2393 SOUTH CONGRESS AV
City-State-Zip: WEST PALM BEACH FL 33406

Title TD
Name TORO, CARLOS M
Address 2393 SOUTH CONGRESS AV
City-State-Zip: WEST PALM BEACH FL 33406

Title S
Name ANGEL, MARCO
Address 2393 SOUTH CONGRESS AV
City-State-Zip: WEST PALM BEACH FL 33406

Title MGR
Name BOTERO, MONICA A
Address 2393 SOUTH CONGRESS AV
City-State-Zip: WEST PALM BEACH FL 33406

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: JAIME OQUENDO

PRESIDENT

04/23/2014

Electronic Signature of Signing Officer/Director Detail

Date