

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000157780

**Entity Name:** FLORIDA INTERNATIONAL FIRM, INC.

**Current Principal Place of Business:**

5708 CODY ST  
HOLLYWWOD, FL 33021

**Current Mailing Address:**

5708 CODY ST  
HOLLYWOOD, FL 33021 US

**FEI Number: 90-0317593**

**Certificate of Status Desired: No**

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

REAL SOLUTIONS BUSINESS SERVICES, INC.  
7120 SW 144 COURT  
SUITE 209  
MIAMI, FL 33183 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 BURNEO, SILVIO R  
Address 9745 MILLER DRIVE  
City-State-Zip: MIAMI FL 33165

Title TR  
Name MACEDO, ROSA A  
Address 9745 MILLER DRIVE  
City-State-Zip: MIAMI FL 33165

Title S  
Name BARRIGA, LUIS E  
Address 9745 MILLER DRIVE  
City-State-Zip: MIAMI FL 33165

Title D  
Name BURNEO, MARCO A  
Address 9745 MILLER DRIVE  
City-State-Zip: MIAMI FL 33165

Title D  
Name SOULE, KARLA A  
Address 9745 MILLER DRIVE  
City-State-Zip: MIAMI FL 33165

*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: SILVIO BURNEO**

**PRESIDENT**

**04/30/2015**

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

\_\_\_\_\_  
Date