

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000069601

Entity Name: RM ANDINA CORP.**Current Principal Place of Business:**14409 NOTTINGHAM WAY CR
ORLANDO, FL 32828**Current Mailing Address:**14409 NOTTINGHAM WAY CR
ORLANDO, FL 32828 US**FEI Number: 20-4987814****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALVARO, RIVAS RMR
14409 NOTTINGHAM WAY CR
ORLANDO, FL 32828 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	D
Name	RAFAEL, SANTAMARIA
Address	CALLE 35 5 -15
City-State-Zip:	BOGOTA, COLOMBIA 00000

Title	D
Name	MORALES, MARTHA
Address	14409 NOTTINGHAM WAY CR
City-State-Zip:	ORLANDO FL 32828

Title	D
Name	RIVAS, CAROLINA
Address	14409 NOTTINGHAM WAY CR
City-State-Zip:	ORLANDO FL 32828

Title	D
Name	MONICA, RIVAS
Address	14409 NOTTINGHAM WAY CR
City-State-Zip:	ORLANDO FL 32828

Title	D
Name	RIVAS, JOSE I
Address	14409 NOTTINGHAM WAY CR
City-State-Zip:	ORLANDO FL 32828

Title	D
Name	RIVAS, ALVARO R
Address	14409 NOTTINGHAM WAY CR
City-State-Zip:	ORLANDO FL 32828

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: ALVARO R RIVAS**AGENT****02/03/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date