

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000132279

**Entity Name:** RIALAB INC.

**Current Principal Place of Business:**

1111 BRICKELL AVE  
SUITE 2100  
MIAMI, FL 33131

**Current Mailing Address:**

1111 BRICKELL AVE  
SUITE 2100  
MIAMI, FL 33131 US

**FEI Number:** 20-5664610

**Certificate of Status Desired:** No

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

BODIN, AMORY WCPA  
4632 SW 10TH STREET  
MIAMI, FL 33134 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            PRES  
Name            ZALLES, ROBERTO APRES  
Address        1111 BRICKELL AVE, SUITE 2100  
City-State-Zip: MIAMI FL 33131

Title            TRES  
Name            ZALLES, ROBERTO ATRES  
Address        1111 BRICKELL AVE, SUITE 2100  
City-State-Zip: MIAMI FL 33131

Title            SECT  
Name            ZALLES, ROBERTO ASECT  
Address        1111 BRICKELL AVE, SUITE 2100  
City-State-Zip: MIAMI FL 33131

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:** ROBERTO ALEJANDRO ZALLES

**PRES.**

**02/04/2015**

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

\_\_\_\_\_  
Date