

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000016839

**Entity Name:** RAFFA W.L.C. COMPANY

**Current Principal Place of Business:**

3450 NW 85TH COURT  
432  
DORAL, FL 33122

**FILED**  
**Apr 20, 2015**  
**Secretary of State**  
**CC9103042966**

**Current Mailing Address:**

3450 NW 85TH COURT  
432  
DORAL, FL 33122 US

**FEI Number: 20-8416247**

**Certificate of Status Desired: No**

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

ROJAS, WILLIAM DR.  
3450 NW 85TH COURT  
432  
DORAL, FL 33122 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 ROJAS, WILLIAM DR.  
Address 3450 NW 85TH COURT  
432  
City-State-Zip: DORAL FL 33122

Title SD  
Name ALVAREZ-ROJAS, LILIAN  
Address 3450 NW 85TH COURT  
432  
City-State-Zip: DORAL FL 33122

*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: WILLIAM ROJAS**

**PRESIDENT**

**04/20/2015**

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

\_\_\_\_\_  
Date