

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000072564

**FILED  
Mar 10, 2016  
Secretary of State  
CC7084366947**

**Entity Name:** SUDANDINA CORP

**Current Principal Place of Business:**

201 CRANDON BLVD., APT 430  
KEY BISCAYNE, FL 33149

**Current Mailing Address:**

201 CRANDON BLVD., APT 430  
KEY BISCAYNE, FL 33149 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MONTERO, JULIAN FESQ.  
18851 NE 29TH AVENUE  
SUITE 900  
AVENTURA, FL 33180 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, P  
Name LETELIER, PABLO  
Address 18851 NE 29TH AVENUE, SUITE 900  
City-State-Zip: AVENTURA FL 33180

Title D, S  
Name ARNAIZ, JUAN R  
Address 18851 NE 29TH AVENUE, SUITE 900  
City-State-Zip: AVENTURA FL 33180

Title D, T  
Name DE IRUARRIZAGA, PABLO  
Address 18851 NE 29TH AVENUE, SUITE 900  
City-State-Zip: AVENTURA FL 33180

*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:** ARNAIZ , JUAN R

**03/10/2016**

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

\_\_\_\_\_  
Date