

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000004242

**Entity Name:** CH2 DESIGN CORP

**Current Principal Place of Business:**

161 CRANDON BLVD  
SUITE 413  
KEY BISCAYNE, FL 33149

**Current Mailing Address:**

161 CRANDON BLVD  
SUITE 413  
KEY BISCAYNE, FL 33149

**FEI Number:** 26-1758488

**Certificate of Status Desired:** No

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

CHAVARRIA, GABRIEL E  
161 CRANDON BLVD  
SUITE 413  
KEY BISCAYNE, FL 33149 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 MS  
Name BRUNO, MARIELLA M  
Address 161 CRANDON BLVD AP 413  
City-State-Zip: KEY BISCAYNE FL 33149

Title MR  
Name CHAVARRIA, GABRIEL E  
Address 161 CRANDON BLVD AP 413  
City-State-Zip: KEY BISCAYNE FL 33149

*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:** GABRIEL CHAVARRIA

**VICEPRESIDENT**

**04/21/2014**

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

\_\_\_\_\_  
Date