

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000040769

Entity Name: CAIST, INC.

Current Principal Place of Business:

2121 PONCE DE LEON BLVD.
SUITE 1050
CORAL GABLES, FL 33134

Current Mailing Address:

2121 PONCE DE LEON BLVD.
SUITE 1050
CORAL GABLES, FL 33134

FEI Number: 26-2478037

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA, INC.
2121 PONCE DE LEON BLVD.
SUITE 1050
CORAL GABLES, 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 P
Name TOLEDO BRUZUAL, ISABEL
Address 2121 PONCE DE LEON BLVD. #1050
City-State-Zip: CORAL GABLES FL 33134

Title V
Name TOLEDO BRUZUAL, CAROLINA F
Address 2121 PONCE DE LEON BLVD. #1050
City-State-Zip: CORAL GABLES FL 33134

Title D
Name TOLEDO BRUZUAL, STEPHANIE C
Address 2121 PONCE DE LEON BLVD. #1050
City-State-Zip: CORAL GABLES FL 33134

Title T
Name TOLEDO BRUZUAL, MORITA
Address 2121 PONCE DE LEON BLVD. #1050
City-State-Zip: CORAL GABLES FL 33134

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: ISABEL TOLEDO BRUZUAL

P

02/04/2016

Electronic Signature of Signing Officer/Director Detail

Date