

**FLORIDA PROFIT CORPORATION ANNUAL REPORT**

**FILED**

DOCUMENT# P08000046160

**Entity Name:** CRESER, CORP.

**Secretary of State  
CC8024361844**

**Current Principal Place of Business:**

15699 SW 73 CIRCLE TERRACE, SUITE I-9  
MIAMI, FL 33193

**Current Mailing Address:**

15699 SW 73 CIRCLE TERRACE, SUITE I-9  
MIAMI, FL 33193

**FEI Number: 26-2569154**

**Certificate of Status Desired: No**

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

JUAN CARLOS DOCUMET  
15699 SW 73 CIRCLE TERRACE  
SUITE 1-9  
MIAMI, FL 33193 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	Title	VPD
Name	SALAZAR, YAMILETH	Name	DOCUMET, JUAN C
Address	15699 SW 73 CIRCLE TERRACE, SUITE I-9	Address	15699 SW 73 CIRCLE TERRACE, SUITE I-9
City-State-Zip:	MIAMI FL 33193	City-State-Zip:	MIAMI FL 33193

*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:**

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

\_\_\_\_\_  
Date