

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000068446

**Entity Name:** COLIN FEULING, PA

**Current Principal Place of Business:**

400 S POINTE DRIVE  
1206  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

400 S POINTE DRIVE  
1206  
MIAMI BEACH, FL 33139

**FEI Number:** 26-3003124

**Certificate of Status Desired:** No

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

FEULING, COLIN  
400 S POINTE DRIVE  
1206  
MIAMI BEACH, FL 33139 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 PVST  
Name FEULING, COLIN  
Address 400 S POINTE DRIVE #1206  
City-State-Zip: MIAMI BEACH FL 33139

*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:** COLIN FEULING

**PRESIDENT**

**01/10/2014**

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

\_\_\_\_\_  
Date