

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000090850

**Entity Name:** ALDANAS , INC.

**Current Principal Place of Business:**

5436 SW 8TH STREET  
CORAL GABLES, FL 33134

**Current Mailing Address:**

5436 SW 8TH STREET  
CORAL GABLES, FL 33134 US

**FEI Number:** 26-3505636

**Certificate of Status Desired:** No

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

SOSA, JORGE LESQ.  
4410 ALTON ROAD  
MIAMI BEACH, FL 33140 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 DE TORO, LORENZO  
Address 5436 SW 8TH STREET  
City-State-Zip: CORAL GABLES FL 33134

Title VP  
Name DE TORO III, LORENZO  
Address 5436 SW 8TH STREET  
City-State-Zip: MIAMI BEACH FL 33134

Title SC  
Name DEL AMO, MARIBEL  
Address 5436 SW 8TH STREET  
City-State-Zip: MIAMI BEACH FL 33134

Title TS  
Name DE TORO, MARIA  
Address 5436 SW 8TH STREET  
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:** LORENZO DE TORO

**PRESIDENT**

**04/17/2014**

Electronic Signature of Signing Officer/Director Detail

Date