

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000026700

**Entity Name:** S.F. FIELD CONSULTANT SERVICES, INC.

**Current Principal Place of Business:**

7969 NW 2 STREET  
#362  
MIAMI, FL 33126

**FILED**  
**Apr 27, 2014**  
**Secretary of State**  
**CC6033868982**

**Current Mailing Address:**

7969 NW 2 STREET  
#362  
MIAMI, FL 33126 US

**FEI Number:** 27-2261689

**Certificate of Status Desired:** No

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

TRAVIESO, ALLISON  
7969 NW 2 STREET  
#362  
MIAMI, FL 33126 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            D, P  
Name            TRAVIESO, ALLISON  
Address        7969 NW 2 STREET  
                  # 362  
City-State-Zip: MIAMI FL 33126

Title            S, T  
Name            TRAVIESO, ALLISON  
Address        7969 NW 2 STREET  
                  # 362  
City-State-Zip: MIAMI FL 33126

*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:** ALLISON TRAVIESO

**REGISTERED AGENT**

**04/27/2014**

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

\_\_\_\_\_  
Date