# above, or on an attachment with all other like empowered.

SIGNATURE: RUBEN TORRES

Electronic Signature of Signing Officer/Director Detail

## MIAMI, FL 33166 **Current Mailing Address:**

**Current Principal Place of Business:** 

DOCUMENT# P10000084433

1661 SW 14 STREET MIAMI, FL 33145 US

6335 NW 74 AVE

#### FEI Number: 20-5194895

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

TORRES, LEO 1661 SW 14 STREET MIAMI, FL 33145 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

#### **Officer/Director Detail :**

Title	VP	Title	Р
Name	TORRES, LEO	Name	TORRES, RUBEN
Address	1661 S.W. 14 STREET	Address	1661 SW 14 STREET
City-State-Zip:	MIAMI FL 33145	City-State-Zip:	MIAMI FL 33145

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

PRESIDENT

08/24/2016

FILED Aug 24, 2016 Secretary of State CC1772272704

Certificate of Status Desired: No

### 2016 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

Entity Name: FOUR TOWERS TRANSPORTATION, INC

Date

Date