

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000027468

**Entity Name:** SANTE ALE, INC.

**Current Principal Place of Business:**

3075 NW SOUTH RIVER DR  
MIAMI, FL 33142

**Current Mailing Address:**

3075 NW SOUTH RIVER DR  
MIAMI, FL 33142

**FEI Number:** 45-0708281

**Certificate of Status Desired:** No

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

LICKSTEIN, FRED K  
1395 BRICKELL AVE 14TH FLOOR  
MIAMI, FL 33131 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           DPS  
Name           RAMOS, BRUNO E  
Address        3075 NW SOUTH RIVER DR  
City-State-Zip: MIAMI FL 33142

Title           CFO  
Name           RAMOS, BRUNO E  
Address        3075 NW SOUTH RIVER DR  
City-State-Zip: MIAMI FL 33142

Title           DVPT  
Name           DE LA CRUZ, CARLOS JR  
Address        3075 NW SOUTH RIVER DR  
City-State-Zip: MIAMI FL 33142

Title           DVP  
Name           BELAUSTEQUIGOITIA, IKER  
Address        3075 NW SOUTH RIVER DR  
City-State-Zip: MIAMI FL 33142

*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:** BRUNO E. RAMOS

DPS

02/12/2015

Electronic Signature of Signing Officer/Director Detail

Date