

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000066331

**Entity Name:** INVERSIONES SULSALUD, INC

**Current Principal Place of Business:**

8285 NW 64TH ST. UNIT 2  
MIAMI, FL 33166

**Current Mailing Address:**

8285 NW 64TH ST. UNIT 2  
MIAMI, FL 33166 US

**FEI Number:** 27-5031699

**Certificate of Status Desired:** No

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

GOZZO, ALEXANDER  
8285 NW 64TH ST. UNIT 2  
MIAMI, FL 33166 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:** ALEXANDER GOZZO

04/29/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            GOZZO, ALEXANDER  
Address        8285 NW 64TH ST. UNIT 2  
City-State-Zip: MIAMI FL 33166

Title            VP  
Name            SULBARAN PEREZ, CARLOS E.  
Address        8285 NW 64TH ST. UNIT 2  
City-State-Zip: MIAMI FL 33166

Title            S  
Name            SULBARAN, RAFAEL  
Address        8285 NW 64TH ST. UNIT 2  
City-State-Zip: MIAMI FL 33166

Title            T  
Name            DEL VECCHIO, ALEXANDRA ISABEL  
Address        8285 NW 64TH ST. UNIT 2  
City-State-Zip: MIAMI FL 33166

*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:** ALEXANDER GOZZO

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04/29/2014

Electronic Signature of Signing Officer/Director Detail

Date