

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000022719

**Entity Name:** MAGUFER INC.

**Current Principal Place of Business:**

10029 PORTOFINO DR  
ORLANDO, FL 32832

**Current Mailing Address:**

10029 PORTOFINO DR  
ORLANDO, FL 32832 US

**FEI Number:** 46-2324624

**Certificate of Status Desired:** No

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            DPS  
Name            AVELLANEDA, AGUSTIN  
Address        8421 NARCOOSSEE ROAD,  
                  APARTMENT 9101  
City-State-Zip: ORLANDO FL 32827

Title            DV  
Name            SILVESTRI, MARIELA  
Address        8421 NARCOOSSEE ROAD,  
                  APARTMENT 9101  
City-State-Zip: ORLANDO FL 32827

*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:** AGUSTIN AVELLANEDA

DPS

03/31/2015

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

\_\_\_\_\_  
Date