

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000071543

Entity Name: SILVER MARQUIS INVESTMENTS, CORP.**Current Principal Place of Business:**1600 PONCE DE LEON BLVD
SUITE 1000 #05
CORAL GABLES, FL 33134**Current Mailing Address:**1600 PONCE DE LEON BLVD
SUITE 1000 #05
CORAL GABLES, FL 33134 US**FEI Number:** 42-1776918**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ZUBILLAGA, FRANCISCO J
1600 PONCE DE LEON BLVD
SUITE 1000 #05
CORAL GABLES, FL 33134 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	P
Name	ZUBILLAGA, FRANCISCO J
Address	1600 PONCE DE LEON BLVD, SUITE 1000 #05
City-State-Zip:	CORAL GABLES FL 33134

Title	VP
Name	ZUBILLAGA, MAYRA C
Address	1600 PONCE DE LEON BLVD, SUITE 1000 #05
City-State-Zip:	CORAL GABLES FL 33134

Title	D
Name	ZUBILLAGA, MAYRA A
Address	1600 PONCE DE LEON BLVD, SUITE 1000 #05
City-State-Zip:	CORAL GABLES FL 33134

Title	D
Name	ZUBILLAGA, MARIA F
Address	1600 PONCE DE LEON BLVD, SUITE 1000 #05
City-State-Zip:	CORAL GABLES FL 33134

Title	D
Name	ZUBILLAGA, JAVIER I
Address	1600 PONCE DE LEON BLVD, SUITE 1000 #05
City-State-Zip:	CORAL GABLES FL 33134

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: ZUBILLAGA, FRANCISCO J

P

02/04/2014

Electronic Signature of Signing Officer/Director Detail_____
Date