Electronic Signature of Signing Officer/Director Detail

### 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000044752

Entity Name: CH2 DESIGN GROUP CORP

### **Current Principal Place of Business:**

1800 SW 1ST, AVE, **SUITE #605** MIAMI, FL 33129

### **Current Mailing Address:**

1800 SW 1ST. AVE. **SUITE #605** MIAMI, FL 33129 US

# FEI Number: 46-5722117

# Name and Address of Current Registered Agent:

GABRIEL, CHAVARRIA E 1800 SW 1ST. AVE. **SUITE #605** MIAMI, FL 33129 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	Ρ	

Title	P	Title	VP
Name	CHAVARRIA, GABRIEL E	Name	BRUNO, MARIELLA M
Address	161 CRANDON BLVD APT 413	Address	161 CRANDON BLVD APT 413
City-State-Zip:	KEY BISCAYNE FL 33149	City-State-Zip:	KEY BISCAYNE FL 33149

03/08/2016 PRESIDENT

# FILED Mar 08, 2016 Secretary of State CC5824428357

Certificate of Status Desired: Yes

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: GABRIEL CHAVARRIA

Date

Date