## 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000051594

Entity Name: LA VILLE CORP.

**Current Principal Place of Business:** 

2121 PONCE DE LEON BLVD. **SUITE 1050** 

CORAL GABLES, FL 33134

**Current Mailing Address:** 

2121 PONCE DE LEON BLVD. **SUITE 1050** 

CORAL GABLES, FL 33134 US

FEI Number: 47-1145134 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA, INC. 2121 PONCE DE LEON BLVD **SUITE 1050** 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

**FILED** Jan 04, 2018

**Secretary of State** 

CC7204337351

Officer/Director Detail:

Title Title VPD

MORENO, CARLOS MORENO, DANIELA Name Name

2121 PONCE DE LEON BLVD. SUITE 2121 PONCE DE LEON BLVD. SUITE Address Address 1050

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title TD

Name MORENO, SANTIAGO

2121 PONCE DE LEON BLVD. SUITE Address

1050

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.

Electronic Signature of Signing Officer/Director Detail