

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000027907

**Entity Name:** VLISSINGEN II INVESTMENT CORP.

**Current Principal Place of Business:**

8400 NW 36TH STREET  
STE #450  
DORAL, FL 33166

**Current Mailing Address:**

8400 NW 36TH STREET  
STE #450  
DORAL, FL 33166 US

**FEI Number:** 81-2132119

**Certificate of Status Desired:** No

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

CABANAS & ASSOCIATES, P.A.  
10520 NW 26TH ST.-STE #C201  
DORAL, FL 33172 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 PR  
Name RAFAEL GONZALEZ DE CASTRO  
Address 8400 NW 36TH STREET  
STE #450  
City-State-Zip: DORAL FL 33166

Title TR/SEC  
Name MARAVER, CESAR A  
Address 8400 NW 36TH STREET  
STE #450  
City-State-Zip: DORAL FL 33166

Title VP  
Name IGLESIAS, ALTHEMAR  
Address 8400 NW 36TH STREET  
STE #450  
City-State-Zip: DORAL 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:** RAFAEL GONZALEZ DE CASTRO

PR

02/15/2017

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

\_\_\_\_\_  
Date