

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000034767

**Entity Name:** MAXXI US SERVICES & CONSTRUCTIONS INC

**Current Principal Place of Business:**

245 SE 1ST ST  
STE 225  
MIAMI, FL 33131

**FILED**  
**Apr 28, 2017**  
**Secretary of State**  
**CC8210091233**

**Current Mailing Address:**

245 SE 1ST ST  
STE 225  
MIAMI, FL 33131 US

**FEI Number:** 37-1825176

**Certificate of Status Desired:** No

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

KALKAS, MARTTI J  
245 SE 1ST ST  
STE 225  
MIAMI, FL 33131 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 COMPER DE SOUZA, LUCIANO  
Address AV NOSSA SENHORA DOS  
NAVEGANTES, 451  
City-State-Zip: VITORIA 29050--335

Title D  
Name PERIN, ATILA  
Address RUA DOM LUIZ SCORTEGAGNA 305  
City-State-Zip: ITARANA ES 29620--000

Title D  
Name PEREIRA PIAZENTINI, RAFAEL  
Address RUA HUGO TALON  
City-State-Zip: ITARANA ES 29620--000

Title D  
Name DAS MERCES DALBONI, TIAGO  
Address RUA JOSE TEIXEIRA 160, APT 1102  
City-State-Zip: VITORIA ES 29005--310

*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:** LUCIANO COMPER DE SOUZA

P

04/28/2017

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

\_\_\_\_\_  
Date