

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000071127

**Entity Name:** ILERNUS CORP

**Current Principal Place of Business:**

999 PONCE DE LEON BLVD STE 705  
CORAL GABLES, FL 33134

**Current Mailing Address:**

999 PONCE DE LEON BLVD STE 705  
CORAL GABLES, FL 33134

**FEI Number:** 81-4099503

**Certificate of Status Desired:** No

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

PADIAL & COMPANY, P.A.  
999 PONCE DE LEON BLVD STE 705  
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:** MYRIAM GONZALEZ

04/28/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name BRITO BORGES, CLOVER HORACIO  
Address 9841 SW 6TH CT  
City-State-Zip: PLANTATIONES FL 33324

Title VP  
Name COVA MARTINEZ, FRANCIS Z  
Address CALLE EL TREBOL RESIDENCIAS  
CARACAS  
City-State-Zip: CARACAS CP 1083

Title D  
Name ELORREAGA ZABALA, ALEXANDER A  
Address CALLE 5 RESIDENCIAS ROYAL  
PALACE  
City-State-Zip: CARACAS CP 1070

Title S  
Name BASTIDAS PAREDas, NOHELIA C  
Address CONJUNTO RESIDENCIAL EL FORTIN  
City-State-Zip: MIRANDA CP 1070

*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:** BRITO BORGES , CLOVER HORACIO

PRESIDENT

04/28/2017

Electronic Signature of Signing Officer/Director Detail

Date