

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000062065

**Entity Name:** DREAMING OUTDOORS INC

**Current Principal Place of Business:**

6537 WEST FLAGLER ST  
5  
MIAMI, FL 33144

**Current Mailing Address:**

6537 WEST FLAGLER ST  
5  
MIAMI, FL 33144 US

**FEI Number:** 82-2234740

**Certificate of Status Desired:** No

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

LEYVA QUINONES, HIRAM  
6537 WEST FLAGLER ST  
5  
MIAMI, FL 33144 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            LEYVA QUINONES, HIRAM  
Address        6537 WEST FLAGLER ST  
                  5  
City-State-Zip: MIAMI FL 33144

Title            VP  
Name            BERRIO REY, YUDIT  
Address        6537 WEST FLAGLER ST  
                  5  
City-State-Zip: MIAMI FL 33144

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:** LEYVA QUINONES , HIRAM

P

03/02/2019

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

\_\_\_\_\_  
Date