

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P18000029423

**Entity Name:** CIPRIANI ENERGY GROUP CORP.

**Current Principal Place of Business:**

2701 PONCE DE LEON BOULEVARD  
SUITE 202  
CORAL GABLES, FL 33134

**FILED**  
**Jan 15, 2021**  
**Secretary of State**  
**4438356380CC**

**Current Mailing Address:**

2701 PONCE DE LEON BOULEVARD  
SUITE 202  
CORAL GABLES, FL 33134 US

**FEI Number:** 61-1882167

**Certificate of Status Desired:** No

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

B2B REGISTERED AGENT, LLC  
2701 PONCE DE LEON BOULEVARD  
SUITE 202  
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:** GIACOMO BOSSA

01/15/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name CIPRIANI, LORENZO  
Address C/O 3650 NW 82ND AVE.  
SUITE 401  
City-State-Zip: DORAL FL 33166

Title D  
Name FIGUEROA FLORES, MARY DELCY  
Address C/O 3650 NW 82ND AVE.  
SUITE 401  
City-State-Zip: DORAL FL 33166

Title V  
Name FIGUEROA FLORES, MARY DELCY  
Address C/O 3650 NW 82ND AVE.  
SUITE 401  
City-State-Zip: DORAL FL 33166

Title PTS  
Name CIPRIANI, LORENZO  
Address C/O 3650 NW 82ND AVE.  
SUITE 401  
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:** CIPRIANI , LORENZO

D

01/15/2021

Electronic Signature of Signing Officer/Director Detail

Date