

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000044267

**Entity Name:** BRIALAN CORP.

**Current Principal Place of Business:**

241 CAPE FLORIDA DR.  
KEY BISCAYNE, FL 33149

**Current Mailing Address:**

241 CAPE FLORIDA DR.  
KEY BISCAYNE, FL 33149

**FEI Number:** 65-0669907

**Certificate of Status Desired:** No

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

ARAZOZA,&FERNANDEZ-FRAGA,PA  
2100 SALZEDO STREET  
SUITE 300  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name GUERRA, ALBERTO  
Address 241 CAPE FL DR.  
City-State-Zip: KEY BISCAYNE FL 33149

Title S  
Name GUERRA, VIVIAN  
Address 241 CAPE FLA DR.  
City-State-Zip: KEY BISCAYNE FL 33149

Title DIRECTOR  
Name GUERRA, BRIANA  
Address 241 CAPE FLORIDA DR.  
City-State-Zip: KEY BISCAYNE FL 33149

Title DIRECTOR  
Name GUERRA, ALAN  
Address 241 CAPE FLORIDA DR.  
City-State-Zip: KEY BISCAYNE FL 33149

*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:** ALBERTO GUERRA

**PRESIDENT**

**01/09/2021**

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

\_\_\_\_\_  
Date