2020 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# S94124

Entity Name: BELTRAM SOUTH, INC.

Current Principal Place of Business:

2560 FOWLER STREET FT MYERS. FL 33901

Current Mailing Address:

2560 FOWLER STREET FT MYERS, FL 33901 US

FEI Number: 65-0297531 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Name

Electronic Signature of Registered Agent

Date

FILED Apr 15, 2020

Secretary of State

6926262368CC

Officer/Director Detail:

Title CEO, AUTHORIZED SIGNATORY Title SECRETARY

Name WHYTE, IAIN Name GERSHMAN, DAVID

Address 2560 FOWLER STREET Address 550 SOUTH DIXIE HIGHWAY

SUITE 300

CFO, AUTHORIZED SIGNATORY

City-State-Zip: FT MYERS FL 33901

City-State-Zip: CORAL GABLES FL 33146

Title CHAIRMAN, AUTHORIZED

SIGNATORY

GROSS. JORGE A JR. Name KEARNEY, MARGARET

Title

Address 550 S. DIXIE HWY #300 Address 2560 FOWLER STREET

City-State-Zip: CORAL GABLES FL 33146-2701 City-State-Zip: FT MYERS FL 33901

Title EXECUTIVE VICE PRESIDENT, Title AUTHORIZED SIGNATORY

AUTHORIZED SIGNATORY (CONTRACTS)

NameTEMPLETON, TROY DNameSTANFORD, CAROLAddress550 S. DIXIE HWY #300Address2560 FOWLER STREET

City-State-Zip: CORAL GABLES FL 33146-2701 City-State-Zip: FT MYERS FL 33901

Title AUTHORIZED SIGNATORY Title ASSISTANT SECRETARY

(CONTRACTS) Name CALDERON, MICHELSA

Name POLEWASKI, XIOMARA Address 550 S DIXIE HWY STE 300

Address 2560 FOWLER STREET City-State-Zip: CORAL GABLES FL 33146-2701

City-State-Zip: FT MYERS FL 33901

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: MICHELSA CALDERON ASSISTANT SECRETARY 04/15/2020

Electronic Signature of Signing Officer/Director Detail

Date