

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000074825

Entity Name: SUPLEMEX USA LLC**Current Principal Place of Business:**14249 SW 62 ST
MIAMI, FL 33183**Current Mailing Address:**14249 SW 62 ST
MIAMI, FL 33183 US**FEI Number:** 27-4059478**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RAVENTOS, ANTONIO
17743 SW 47 ST.
MIRAMAR, FL 33029 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**Authorized Person(s) Detail :**

Title	PRESIDENT
Name	CAINAS, JORGE A
Address	FELIX CUEVAS 329 TORRE B DPTO 402 COLONIA DEL VALLE. DELEGACION BENITO JUAREZ
City-State-Zip:	MEXICO DISTRITO FEDERAL 03100

Title	VP
Name	MORFA, MAYLAN
Address	FELIX CUEVAS 329 TORRE B DPTO 402 COLONIA DEL VALLE. DELEGACION BENITO JUAREZ
City-State-Zip:	MEXICO DISTRITO FEDERAL 03100

Title	MGR
Name	DE LA RIVA, TOMAS
Address	14249 SW 62 ST
City-State-Zip:	MIAMI FL 33183

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MAYLAN MORFA OROZCO

VP

03/01/2016

Electronic Signature of Signing Authorized Person(s) Detail_____
Date