

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000044336

Entity Name: ADDIKAI DORAL (USA) LLC.

Current Principal Place of Business:

C/O ERNESTO SANCHEZ, P.A./ MICHEL CIVAL
1313 PONCE DE LEON BLVD, STE. 301
CORAL GABLES, FL 33134

Current Mailing Address:

C/O ERNESTO SANCHEZ, P.A./ MICHEL CIVAL
1313 PONCE DE LEON BLVD, STE. 301
CORAL GABLES, FL 33134

FEI Number: 33-1227940

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANCHEZ, ERNESTO ESQ.
ERNESTO SANCHEZ, P.A.
1313 PONCE DE LEON BLVD, STE. 301
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

Authorized Person(s) Detail :

Title MGR
Name CIVAL, MICHEL
Address 1313 PONCE DE LEON BLVD, STE.
301
City-State-Zip: CORAL GABLES FL 33134

Title MGR
Name CIVAL, FERNAND
Address 1313 PONCE DE LEON BLVD, STE.
301
City-State-Zip: CORAL GABLES FL 33134

Title MGR
Name FERNANDE, NELSON ENRIQUE B
Address 1313 PONCE DE LEON BLVD, STE.
301
City-State-Zip: CORAL GABLES FL 33134

Title MGR
Name CIVAL AVELLAN, IRENE
Address 1313 PONCE DE LEON BLVD, STE.
301
City-State-Zip: CORAL GABLES FL 33134

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: MICHEL CIVAL

MGR

04/07/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date