

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000153152

Entity Name: IBP - INTERNATIONAL BENEFIT POINTS LLC

Current Principal Place of Business:

4701 N FEDERAL HWY
SUITE 470
POMPANO BEACH, FL 33064

Current Mailing Address:

4701 N FEDERAL HWY
SUITE 470
POMPANO BEACH, FL 33064 US

FEI Number: 82-2233113

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DECARVALHO, ELIWAR
4701 N FEDERAL HWY
SUITE 470
POMPANO BEACH, FL 33064 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 AMBR
Name CARRIONE, WILSON THOMAZ
Address RUA SILVIA POZZANO, 3003 BLOCO 6
APT 101
City-State-Zip: RIO DE JANEIRO 22790--671

Title AMBR
Name DA SILVA CARRIONE, ALLAN
Address RUA SILVIA POZZANO, 3003 BLOCO 6
APT 101
City-State-Zip: RIO DE JANEIRO 22790--671

Title AMBR
Name CALAZANS CORREA, DIOGO
Address RUA VINICIUS DE MORAIS, 146 APT
303
City-State-Zip: RIO DE JANEIRO 22411--010

Title AMBR
Name SILVA LEAO CORREA, MARCOS
Address ESTRADA DO PAU FERRO APT 904
City-State-Zip: RIO DE JANEIRO 22743-050

Title AMBR
Name GARCIA PINTO COELHO, FLAVIO
Address AV RODOLFO AMOEDO 164 APR 301
City-State-Zip: RIO JANEIRO 22620-350

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: WILSON THOMAZ CARRIONE

AMBR

05/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date