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. 04/30/2014

SIGNATURE: FABIENNE SEVERIN

Electronic Signature of Signing Officer/Director Detail

FEI Number: 42-2428461

Name and Address of Current Registered Agent:

SEVERIN, FABIENNE 10912 MERRYWOOD DRIVE JACKSONVILLE, FL 32256 US

DOCUMENT# P13000030353

10912 MERRYWOOD DRIVE JACKSONVILLE, FL 32256

Current Mailing Address: 10912 MERRYWOOD DRIVE JACKSONVILLE, FL 32256 US

Current Principal Place of Business:

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

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: FABY SEVERIN PROFESSIONAL SERVICES, INCORPOTRATED

Officer/Director Detail :

Title	Р
Name	SEVERIN, FABIENNE
Address	10912 MERRYWOOD DRIVE
City-State-Zip:	JACKSONVILLE FL 32256

PRESIDENT

FILED Apr 30, 2014 Secretary of State CC9101571989

Certificate of Status Desired: No

Date

Date