

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005348

Entity Name: PROFESA NATIONAL, INC.**Current Principal Place of Business:**201 SE 2ND AVE
APT. 1604
MIAMI, FL 33131**Current Mailing Address:**PO BOX 10527
MIAMI, FL 33101 US**FEI Number:** 20-0074114**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ORTEGA, RAMON
1555 BONAVENTURE BLVD
SUITE 1028
WESTON, FL 33326 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:** RAMON ORTEGA**04/23/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GONZALEZ, RAFAEL
Address PO BOX 10527
City-State-Zip: MIAMI FL 33101

Title VP
Name BETANCOURT, EDWIN
Address PO BOX 10527
City-State-Zip: MIAMI FL 33101

Title VP
Name AGRAIT, THOMAS
Address PO BOX 10527
City-State-Zip: MIAMI FL 33101

Title TREASURER
Name ORTEGA, RAMON
Address PO BOX 10527
City-State-Zip: MIAMI FL 33101

Title SECRETARY
Name BARRAZA, HELENA
Address PO BOX 10527
City-State-Zip: MIAMI FL 33101

Title OFFICER
Name VAZQUEZ, LUIS JOEL
Address PO BOX 10527
City-State-Zip: MIAMI FL 33101

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LUIS JOEL VAZQUEZ**OFFICER****04/23/2023**

Electronic Signature of Signing Officer/Director Detail

Date