

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005641

Entity Name: 123 CREDIT COUNSELORS, INC.**Current Principal Place of Business:**1000 NW 57TH COURT
STE 860
MIAMI, FL 33126**Current Mailing Address:**1000 NW 57 COURT
SUITE 860
MIAMI, FL 33126 US**FEI Number:** 20-3351880**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GARCIA, RICHARD A
1000 NW 57TH CT
STE 860
MIAMI, FL 33126-3295 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**Officer/Director Detail :**

Title	T
Name	GARCIA, RICHARD A
Address	1000 NW 57 CT STE 860
City-State-Zip:	MIAMI FL 33126

Title	P
Name	GARCIA, ELIZABETH
Address	1000 NW 57 CT STE 860
City-State-Zip:	MIAMI FL 33126

Title	D
Name	DIAZ, LUIS
Address	1000 NW 57 CT STE 860
City-State-Zip:	MIAMI FL 33126

Title	D
Name	PFEIFER, TIFFANY
Address	1000 NW 57 CT STE 860
City-State-Zip:	MIAMI FL 33126

Title	T
Name	PFEIFER, TIFFANY
Address	1000 NW 57 CT STE 860
City-State-Zip:	MIAMI FL 33126

Title	D
Name	GALLOR, ROLAND
Address	1000 NW 57 CT STE 860
City-State-Zip:	MIAMI FL 33126

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: ELIZABETH N GARCIA**PRESIDENT****02/01/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date