

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000002807

Entity Name: POWER ACCESS, INC.**Current Principal Place of Business:**1616 MICHIGAN AVE
UNIT#1
MIAMI BEACH, FL 33139**Current Mailing Address:**1616 MICHIGAN AVE
UNIT#1
MIAMI BEACH, FL 33139**FEI Number:** 27-3497929**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NEW, DAVID
1616 MICHIGAN AVE
UNIT#1
MIAMI BEACH, FL 33139 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	PRESIDENT
Name	NEW, DAVID
Address	1616 MICHIGAN AVE UNIT#1
City-State-Zip:	MIAMI BEACH FL 33139

Title	VP
Name	VELASCO, CECILIA
Address	9111 EAST BAY HARBOR DRIVE
City-State-Zip:	BAY HARBOR ISLANDS FL 33154

Title	TREASURER
Name	BURSTEIN, HARVEY
Address	1775 WASHINGTON AVE
City-State-Zip:	MIAMI BEACH FL 33139

Title	DIRECTOR
Name	BAKKUM, LORI
Address	1616 MICHIGAN AVE UNIT#1
City-State-Zip:	MIAMI BEACH FL 33139

Title	DIRECTOR
Name	GROSS, SAUL
Address	1616 MICHIGAN AVE UNIT#1
City-State-Zip:	MIAMI BEACH FL 33139

Title	DIRECTOR
Name	WALKER, PHIL
Address	1616 MICHIGAN AVE UNIT#1
City-State-Zip:	MIAMI BEACH FL 33139

Title	DIRECTOR
Name	ARCE, ENRIQUE
Address	1616 MICHIGAN AVE UNIT#1
City-State-Zip:	MIAMI BEACH FL 33139

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: R. DAVID NEW

PRESIDENT

06/30/2020

Electronic Signature of Signing Officer/Director Detail_____
Date