## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000003708

Entity Name: OPERATION PAW, INC.

**Current Principal Place of Business:** 

929 NW 49 STREET MIAMI. FL 33127

Feb 05, 2019 **Secretary of State** 2296409364CC

**FILED** 

## **Current Mailing Address:**

929 NW 49 STREET MIAMI. FL 33127

FEI Number: 46-5405193 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WILLIAMS, TIA 929 NW 49 STREET MIAMI, FL 33127 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 Title D

WILLIAMS, TIA Name RASHID, ISMAILIA Name 929 NW 49 STREET Address 4699 NW 7 AVE Address City-State-Zip: MIAMI FL 33127 City-State-Zip: MIAMI FL 33127

Title D

BOWMASTER, LEISA Name

1195 WEST RIVERSIDE DRIVE Address

City-State-Zip: PERTH-ANDOVER NEW BRUNSWICK

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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: TIA WILLIAMS 02/05/2019 **DIRECTOR**