

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 391170

Entity Name: THIS LAND OF ACRES, INC.**Current Principal Place of Business:**6710 MAIN ST
SUITE 233
MIAMI LAKES, FL 33014**Current Mailing Address:**6710 MAIN STREET
SUITE 233
MIAMI LAKES, FL 33014 US**FEI Number:** 59-1370553**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TERNER, SALOMON
6710 MAIN ST
SUITE 233
MIAMI LAKES, FL 33014 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 PD
Name TERNER, SALOMON
Address 25 SE 2ND AVE
SUITE 725
City-State-Zip: MIAMI FL 33131Title D
Name TERNER, GISELA
Address 8650 N SENECA ROAD
City-State-Zip: FOX POINT WI 53217Title TREASURER
Name SCHUCK, LEONOR
Address 25 SE 2ND AVE
SUITE 725
City-State-Zip: MIAMI FL 33131Title DIRECTOR
Name WEISSMAN, ANA
Address 6710 MAIN ST
SUITE 233
City-State-Zip: MIAMI LAKES FL 33014Title D
Name MARQUEZ, NANCY
Address 2550 S.W. 17TH AVE.
City-State-Zip: MIAMI FL 33133Title SD
Name TERNER, MARCIA
Address 5500 COLLINS AVE, APT 902
City-State-Zip: MIAMI FL 33140Title DIRECTOR
Name TERNER, ROSA
Address 6710 MAIN ST
SUITE 233
City-State-Zip: MIAMI LAKES FL 33014

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.

SIGNATURE: LEONOR SCHUCK

TREASURER

01/23/2023

Electronic Signature of Signing Officer/Director Detail_____
Date