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: DIONE SLIGER BAZILE

Electronic Signature of Signing Officer/Director Detail

PORT ORANGE, FL 32127 US FEI Number: 59-1976051

Entity Name: SLIGER & ASSOCIATES, INC.

Current Principal Place of Business:

Name and Address of Current Registered A

ZAPERT, JOSEPH E 3921 NOVA RD PORT ORANGE, FL 32127 US

DOCUMENT# 657995

PORT ORANGE, FL 32127

3921 NOVA ROAD

Current Mailing Address:

3921 NOVA ROAD

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

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Officer/Director Detail :

Title	Р	Title	OFFICER
Name	ZAPERT, JOSEPH E	Name	BAZILE, DIONE S
Address	3921 NOVA RD	Address	3921 NOVA RD
City-State-Zip:	PORT ORANGE FL 32127	City-State-Zip:	PORT ORANGE FL 32127

Certificate of Status Desired: No

FILED Feb 07, 2019 Secretary of State 7431601878CC

Date

Date

02/07/2019

OFFICER