

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H15006

Entity Name: SAWGRASS ROCK QUARRY, INC.**Current Principal Place of Business:**14005 NW 186 STREET
HIALEAH, FL 33018**Current Mailing Address:**9675 NW 117 AVENUE
SUITE 108
MIAMI, FL 33178 US**FEI Number:** 59-2429344**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC.
115 NORTH CALHOUN ST., SUITE 4
TALLAHASSEE, FL 32301 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	DIRECTOR
Name	FERNANDEZ GALLAR, JOSE ANTONIO
Address	PASEO DE LA CASTELLANA 259D TORRE EMPERADOR
City-State-Zip:	MADRID 28046

Title	SECRETARY
Name	DAVIDSON, ZOË
Address	26-15 ULMER ST.
City-State-Zip:	COLLEGE POINT NY 11354

Title	VP
Name	HICKEY, DONALD
Address	9675 NW 117 AVENUE SUITE 108
City-State-Zip:	MIAMI FL 33178

Title	DIRECTOR
Name	RUIZ ANDUJAR, DANIEL
Address	9675 NW 117 AVENUE SUITE 108
City-State-Zip:	MIAMI FL 33178

Title	ASSISTANT SECRETARY
Name	WASHINGTON, PAUL
Address	9675 NW 117 AVENUE SUITE 108
City-State-Zip:	MIAMI FL 33178

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: PAUL WASHINGTON**ASSISTANT SECRETARY** 04/17/2023_____
Electronic Signature of Signing Officer/Director Detail_____
Date