

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J41454

Entity Name: CHEN MOORE AND ASSOCIATES, INC.**Current Principal Place of Business:**500 WEST CYPRESS CREEK ROAD
SUITE 630
FORT LAUDERDALE, FL 33309**Current Mailing Address:**500 WEST CYPRESS CREEK ROAD
SUITE 630
FORT LAUDERDALE, FL 33309 US**FEI Number:** 59-2739866**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MOORE, PETER MDP
500 WEST CYPRESS CREEK ROAD
SUITE 630
FORT LAUDERDALE, FL 33309 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	DP
Name	MOORE, PETER M
Address	500 WEST CYPRESS CREEK ROAD SUITE 630
City-State-Zip:	FORT LAUDERDALE FL 33309

Title	DT
Name	MCCLAIR, JASON J
Address	500 WEST CYPRESS CREEK ROAD SUITE 630
City-State-Zip:	FORT LAUDERDALE FL 33309

Title	D
Name	BETANCOURT, CRISTOBAL A
Address	500 WEST CYPRESS CREEK ROAD SUITE 630
City-State-Zip:	FORT LAUDERDALE FL 33309

Title	SECRETARY
Name	BREA, SAFIYA T
Address	500 WEST CYPRESS CREEK ROAD SUITE 630
City-State-Zip:	FORT LAUDERDALE FL 33309

Title	CFO
Name	DANNELLY, SEAN E
Address	500 WEST CYPRESS CREEK ROAD SUITE 630
City-State-Zip:	FORT LAUDERDALE FL 33309

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: PETER MOORE

PRESIDENT

01/08/2018

Electronic Signature of Signing Officer/Director Detail_____
Date