

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L62832

**Entity Name:** LOPEFRA CORP.

**Current Principal Place of Business:**

7855 NW 29 STREET  
182  
DORAL, FL 33122

**Current Mailing Address:**

7855 NW 29 STREET  
182  
DORAL, FL 33122

**FEI Number:** 65-0182502

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HARTIGAN, ROSEMARY L  
7855 NW 29 STREET  
182  
DORAL, FL 33122 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            D  
Name            LOPEZ, CECILIO  
Address        7855 NW 29 STREET, #182  
City-State-Zip: DORAL FL 33122

Title            D  
Name            LOPEZ, CARLOS C  
Address        7855 NW 29 STREET, #182  
City-State-Zip: DORAL FL 33122

Title            D  
Name            HARTIGAN, ROSEMARY L  
Address        7855 NW 29 STREET. #182  
City-State-Zip: DORAL FL 33122

Title            DIRECTOR  
Name            LOPEZ, ANTHONY C  
Address        7855 NW 29 STREET. #182  
City-State-Zip: DORAL FL 33122

*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:** ROSEMARY HARTIGAN

**DIRECTOR**

**02/13/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date