

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M20143

**Entity Name:** LUIS A. DE ARMAS, P.A.

**Current Principal Place of Business:**

C/O CORPORATION COMPANY OF MIAMI  
200 SOUTH BISCAYNE BLVD SUITE 4100 (LAD)  
MIAMI, FL 33131

**Current Mailing Address:**

C/O CORPORATION COMPANY OF MIAMI  
200 SOUTH BISCAYNE BLVD SUITE 4100 (LAD)  
MIAMI, FL 33131 US

**FEI Number:** 59-2580605

**Certificate of Status Desired:** No

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

CORPORATION COMPANY OF MIAMI  
C/O CORPORATION COMPANY OF MIAMI  
200 SOUTH BISCAYNE BLVD SUITE 4100 (LAD)  
MIAMI, FL 33131 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            DPTS  
Name            DE ARMAS, LUIS A.  
Address        C/O CORPORATION COMPANY OF  
                  MIAMI  
                  200 SOUTH BISCAYNE BLVD SUITE  
                  4100 (LAD)  
City-State-Zip: MIAMI FL 33131

*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:** DE ARMAS, LUIS A.

DPTS

01/26/2018

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

\_\_\_\_\_ Date