

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M41909

Entity Name: RODRIGUEZ, TRUEBA & CO., C.P.A., P.A.**Current Principal Place of Business:**2600 S DOUGLAS ROAD
SUITE #800
CORAL GABLES, FL 33134**Current Mailing Address:**2600 S DOUGLAS ROAD
SUITE #800
CORAL GABLES, FL 33134 US**FEI Number:** 59-2738713**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RODRIGUEZ, MARIANO J.
2600 S DOUGLAS ROAD
SUITE #800
CORAL GABLES, FL 33134 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	PD
Name	RODRIGUEZ, MARIANO J
Address	2600 S DOUGLAS ROAD SUITE #800
City-State-Zip:	CORAL GABLES FL 33134

Title	D
Name	RODRIGUEZ, JARNETTE G
Address	2600 S DOUGLAS ROAD SUITE #800
City-State-Zip:	CORAL GABLES FL 33134

Title	V
Name	TRUEBA, CARLOS M
Address	2600 S DOUGLAS ROAD SUITE #800
City-State-Zip:	CORAL GABLES FL 33134

Title	D
Name	GONZALEZ, JUAN C
Address	2600 S DOUGLAS ROAD SUITE #800
City-State-Zip:	CORAL GABLES FL 33134

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: MARIANO RODRIGUEZ**PRESIDENT****02/25/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date