

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000064309

**Entity Name:** CIOLA & ASSOCIATES, INC.

**Current Principal Place of Business:**

2030 S DOUGLAS ROAD  
SUITE 212  
CORAL GABLES, FL 33134

**FILED**  
**Mar 07, 2019**  
**Secretary of State**  
**1541558608CC**

**Current Mailing Address:**

2030 S DOUGLAS ROAD  
SUITE 212  
CORAL GABLES, FL 33134 US

**FEI Number:** 65-1033222

**Certificate of Status Desired:** No

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

CIOLA, SANDRA  
2030 S DOUGLAS ROAD  
SUITE 212  
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	P	Title	V
Name	CIOLA, CLAUDE M	Name	CIOLA, SANDRA
Address	136 SANTANDER AVE	Address	136 SANTANDER AVE
City-State-Zip:	MIAMI FL 33134	City-State-Zip:	MIAMI 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:** CIOLA, CLAUDE M

P

03/07/2019

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

\_\_\_\_\_  
Date