

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000048635

**Entity Name:** ANGELICAL SERVICE, INC.

**Current Principal Place of Business:**

987 SW 37TH AVE  
1110  
MIAMI, FL 33135

**Current Mailing Address:**

6303 BLUE LAGOON DR  
350  
MIAMI, FL 33126 US

**FEI Number:** 59-3719863

**Certificate of Status Desired:** No

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

DE MELLO, FABIANA  
6303 BLUE LAGOON DR  
350  
MIAMI, FL 33126 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	VP
Name	DE MELLO, FABIANA	Name	DA SILVA, EDSON
Address	987 SW 37TH AVE 1110	Address	987 SW 37TH AVE 1110
City-State-Zip:	MIAMI FL 33135	City-State-Zip:	MIAMI FL 33135

*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:** FABIANA DE MELLO

**PRESIDENT**

**04/26/2018**

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

\_\_\_\_\_  
Date