

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000075745

Entity Name: JOE LORD AND ASSOCIATES, INC.**Current Principal Place of Business:**4029 NORTHEAST 10TH AVENUE
FORT LAUDERDALE, FL 33334**Current Mailing Address:**4029 NORTHEAST 10TH AVENUE
FORT LAUDERDALE, FL 33334**FEI Number:** 14-1883246**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MATERDOMINI, JOSEPH
2041 MAPLEWOOD DR
CORAL SPRINGS, FL 33071 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
Name	MATERDOMINI, JOSEPH
Address	4029 NORTHEAST 10TH AVENUE
City-State-Zip:	FORT LAUDERDALE FL 33334

Title	VP
Name	MATERDOMINI, LADY
Address	4029 NORTHEAST 10TH AVENUE
City-State-Zip:	FORT LAUDERDALE FL 33334

Title	VPST
Name	MATERDOMINI, DINA
Address	4029 NORTHEAST 10TH AVENUE
City-State-Zip:	FORT LAUDERDALE FL 33334

Title	D
Name	MATERDOMINI, RICHARD
Address	6409 NW 99 DRIVE
City-State-Zip:	PARKLAND FL 33076

Title	D
Name	MATERDOMINI, MICHAEL
Address	2056 MAPLEWOOD DRIVE
City-State-Zip:	CORAL SPRINGS FL 33071

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: JOSEPH MATERDOMINI**02/01/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date