# 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: SUGRIM SEEWAH

Electronic Signature of Signing Officer/Director Detail

SIGNATURE:

#### **Officer/Director Detail :**

Title	Ρ	Title	V
Name	SEEWAH, SUGRIM R	Name	SEEWAH, BARBARA J
Address	11491 NW 26TH STREET	Address	11491 NW 26TH STREET
City-State-Zip:	PLANTATION FL 33323	City-State-Zip:	PLANTATION FL 33323

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000097691

Entity Name: MAGNOLIA RESIDENCE INC

#### **Current Principal Place of Business:**

4838 NW 93 RD TERRACE SUNRISE, FL 33351

#### **Current Mailing Address:**

4838 NW 93 RD TERRACE SUNRISE, FL 33351

### FEI Number: 56-2298179

## Name and Address of Current Registered Agent:

SEEWAH, SUGRIM R 11491 NW 26TH STREET PLANTATION, FL 33323 US

Electronic Signature of Registered Agent

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.

FILED Feb 16, 2020 Secretary of State 0997288079CC

Date

Certificate of Status Desired: No

PRESIDENT

02/16/2020

Date