

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000120157

**Entity Name:** BALCAL PROFESSIONAL SERVICE, INC.

**FILED**  
**Apr 22, 2017**  
**Secretary of State**  
**CC9123828230**

**Current Principal Place of Business:**

1655 NE 115 ST  
38-B  
MIAMI, FL 33181

**Current Mailing Address:**

1655 NE 115 ST  
38-B  
MIAMI, FL 33181

**FEI Number: 04-3722269**

**Certificate of Status Desired: No**

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

BALCAZAR ROMERO, GUSTAVO A  
1655 NE 115 ST  
38-B  
MIAMI, FL 33181 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 BALCAZAR ROMERO, GUSTAVO A  
Address 1655 NE 115 ST APT 38B  
City-State-Zip: MIAMI FL 33181

Title VD  
Name CALDAS ECHEVERRY, ANA P  
Address 1655 NE 115 ST APT 38B  
City-State-Zip: MIAMI FL 33181

Title SD  
Name CALDAS, MARIA FERNANDA  
Address 11111 BISCAYNE BOULEVARD  
APT. 310  
City-State-Zip: MIAMI FL 33181

*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: GUSTAVO A BALCAZAR ROMERO**

**PD**

**04/22/2017**

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

\_\_\_\_\_  
Date