

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000122026

**Entity Name:** COMPLIANCE & MANAGEMENT SOLUTIONS, INC.

**FILED**  
**Jan 27, 2019**  
**Secretary of State**  
**7749450496CC**

**Current Principal Place of Business:**

20 ISLAND AVENUE  
SUITE 901  
MIAMI BEACH, FL 33139-1347

**Current Mailing Address:**

20 ISLAND AVENUE  
SUITE 901  
MIAMI BEACH, FL 33139-1347 US

**FEI Number:** 20-0507397

**Certificate of Status Desired:** No

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

ROCA, ANTONIO L  
3370 MARY STREET  
MIAMI, FL 33133 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            PRES  
Name            ROCA, MARIA M  
Address        20 ISLAND AVENUE #901  
City-State-Zip: MIAMI BEACH FL 33139

Title            S  
Name            ROCA, MARIA M  
Address        20 ISLAND AVENUE #901  
City-State-Zip: MIAMI BEACH FL 33139

Title            T  
Name            ROCA, MARIA M  
Address        20 ISLAND AVENUE #901  
City-State-Zip: MIAMI BEACH FL 33139

*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:** MARIA ROCA

**PRESIDENT**

**01/27/2019**

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

\_\_\_\_\_  
Date