

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000000597

**Entity Name:** AMANDA MAXWELL, P.A.

**Current Principal Place of Business:**

ONE BISCAYNE TOWER  
2 S. BISCAYNE BLVD SUITE 3100  
MIAMI, FL 33131

**Current Mailing Address:**

ONE BISCAYNE TOWER  
2 S. BISCAYNE BLVD SUITE 3100  
MIAMI, FL 33131 US

**FEI Number:** 02-0713885

**Certificate of Status Desired:** No

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

MAXWELL, AMANDA L ESQ.  
ONE BISCAYNE TOWER  
2 S. BISCAYNE BLVD SUITE 3100  
MIAMI, FL 33131 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:** AMANDA L. MAXWELL

03/16/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name MAXWELL, AMANDA  
Address ONE BISCAYNE TOWER  
2 S. BISCAYNE BLVD SUITE 3100  
City-State-Zip: MIAMI FL 33131

*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:** AMANDA MAXWELL

**REGISTERED AGENT**

03/16/2023

Electronic Signature of Signing Officer/Director Detail

Date