# 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000115671

Entity Name: A/C DOCTOR COMPLETE INC.

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

1206 FLOMICH ST. DAYTONA BEACH, FL 32117

# **Current Mailing Address:**

1206 FLOMICH ST. DAYTONA BEACH, FL 32117 US

# FEI Number: 75-3163388

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

HARVEY, GLEN V 14 KINGSGATE CT. ORMOND BEACH, FL 32174 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.

Electronic Signature of Registered Agent

# Officer/Director Detail :

Title	PRES
Name	HARVEY, GLEN V
Address	14 KINGSGATE CT.
City-State-Zip:	ORMOND BEACH FL 32174

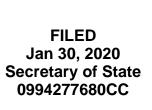
I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GLEN HARVEY

PRESIDENT

01/30/2020 Date

Electronic Signature of Signing Officer/Director Detail



Certificate of Status Desired: No

01/30/2020

Date