

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000070199

Entity Name: BIEDA MANAGEMENT INC**Current Principal Place of Business:**525 10TH STREET
SUITE 503
LAKE PARK, FL 33403**Current Mailing Address:**525 10TH STREET
SUITE 503
LAKE PARK, FL 33403 US**FEI Number:** 20-2844571**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BIEDA, MIMI
525 10TH STREET
SUITE 503
LAKE PARK, FL 33403 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	P-D
Name	BIEDA, MIMI
Address	525 10TH STREET SUITE 503
City-State-Zip:	LAKE PARK FL 33403

Title	VP-D
Name	BIEDA, LEVI
Address	525 10TH STREET SUITE 503
City-State-Zip:	LAKE PARK FL 33403

Title	TREASURER, DIRECTOR
Name	BIEDA, DAVID
Address	525 10TH STREET SUITE 503
City-State-Zip:	LAKE PARK FL 33403

Title	DIRECTOR
Name	GINSBERG, FAITH
Address	525 10TH STREET SUITE 503
City-State-Zip:	LAKE PARK FL 33403

Title	DIRECTOR
Name	HOBERMAN, DANIELLE
Address	525 10TH STREET SUITE 503
City-State-Zip:	LAKE PARK FL 33403

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: MIMI BIEDA

P-D

06/30/2020

Electronic Signature of Signing Officer/Director Detail_____
Date