

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000023574

Entity Name: PROINTEL INVESTMENTS INC.**Current Principal Place of Business:**500 BAYVIEW DR., APT 227
SUNNY ISLES BEACH, FL 33160**Current Mailing Address:**500 BAYVIEW DR., APT 227
SUNNY ISLES BEACH, FL 33160 US**FEI Number:** 20-4471230**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TRILLA, EDUARDO J
500 BAYVIEW DR., APT 227
SUNNY ISLES BEACH, FL 33160 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
Name	JUAREZ DE TRILLA, MARIA L
Address	500 BAYVIEW DR., APT 227
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	VP
Name	TRILLA, EDUARDO J
Address	500 BAYVIEW DR., APT 227
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	VP
Name	TRILLA, MARIA V
Address	500 BAYVIEW DR., APT 227
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	VP
Name	TRILLA, EDUARDO J
Address	500 BAYVIEW DR., APT 227
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	T
Name	FLORENCIA TRILLA, MARIA ESQ
Address	500 BAYVIEW DR., APT 227
City-State-Zip:	SUNNY ISLES BEACH FL 33160

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: MARIAJUAREZDETRILLA

P

02/10/2022

Electronic Signature of Signing Officer/Director Detail_____
Date