

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000110481

Entity Name: LOVINGER FINANCIAL SERVICES INC

Current Principal Place of Business:

4016 HENDERSON BLVD
STE 0
TAMPA, FL 33629

Current Mailing Address:

4016 HENDERSON BLVD
STE 0
TAMPA, FL 33629

FEI Number: 20-5427677

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MONTE DE OCA, CHRISTINA
4016 HENDERSON BLVD
STE 0
TAMPA, FL 33629 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 MONTE DE OCA, CHRISTINA
Address 4016 HENDERSON BLVD STE 0
City-State-Zip: TAMPA FL 33629

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: CHRISTINA MONTE DE OCA

P

01/13/2017

Electronic Signature of Signing Officer/Director Detail

Date