above, or on an attachment with all other like empowered. SIGNATURE: JOHN IBARRA

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

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

Entity Name: JOHN IBARRA & ASSOC., INC.

Current Principal Place of Business:

777 N.W. 72 AVENUE SUITE 3025 MIAMI, FL 33126

Current Mailing Address:

777 N.W. 72 AVENUE SUITE 3025 MIAMI, FL 33126

FEI Number: 26-3698470

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

ARNALDO VELEZ, P.A. 35 ALMERIA AVENUE CORAL GABLES, FL 33134 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:

Officer/Director Detail :			
Title	PD	Title	VPD
Name	IBARRA, JOHN	Name	IBARRA, CARLOS M
Address	777 N.W. 72 AVENUE, SUITE 3025	Address	777 N.W. 72 AVENUE, SUITE 3025
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT DOCUMENT# P08000100616

Date

04/09/2020 Date

FILED Apr 09, 2020 Secretary of State 1339601501CC

Certificate of Status Desired: No

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.