

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000002511

Entity Name: STUART K. HOFFMAN, ESQ., P.A.

Current Principal Place of Business:

4585 PONCE DE LEON BLVD. APT #719
CORAL GABLES, FL 33146

Current Mailing Address:

4585 PONCE DE LEON BLVD. APT #719
CORAL GABLES, FL 33146 US

FEI Number: 26-4033391

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOFFMAN, STUART K
4585 PONCE DE LEON BLVD. APT #719
CORAL GABLES, FL 33146 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 PSTD
Name HOFFMAN, STUART K
Address 4585 PONCE DE LEON BLVD. APT
#719
City-State-Zip: CORAL GABLES FL 33146

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: STUART HOFFMAN

PRESIDENT

01/25/2019

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date