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: RENILDE CAMPOS

Electronic Signature of Signing Officer/Director Detail

#### 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT DOCUMENT# P13000027252

Entity Name: CAMPOS PROPERTIES INC

# Current Principal Place of Business:

2017 SW KASIM TERRACE PORT ST LUCIE, FL 34953

# **Current Mailing Address:**

2017 SW KASIM TERRACE PORT ST LUCIE, FL 34953

# FEI Number: 46-2352949

# Name and Address of Current Registered Agent:

CAMPOS, RENILDE 2017 SW KASIM TERRACE PORT ST LUCIE, FL 34953 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

#### Officer/Director Detail :

Title	P	Title	VP
Name	CAMPOS, RENILDE	Name	CAMPOS, WILLIAM
Address	2017 SW KASIM TERRACE	Address	2017 SW KASIM TERRACE
City-State-Zip:	PORT ST LUCIE FL 34953	City-State-Zip:	PORT ST LUCIE FL 34953

Certificate of Status Desired: No

FILED Apr 25, 2019 Secretary of State 1443366724CC

Date

Date

PRESIDENT

04/25/2019