

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000051463

**Entity Name:** SUPPLY 220, INC

**Current Principal Place of Business:**

6157 NW 167TH ST  
SUITE F23  
MIAMI, FL 33015

**Current Mailing Address:**

6157 NW 167TH ST  
SUITE F23  
MIAMI, FL 33015 US

**FEI Number:** 46-2982757

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GOMEZ, JOSE M  
6157 NW 167TH ST  
SUITE F23  
MIAMI, FL 33015 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            DP  
Name            GOMEZ, JOSE M  
Address        16745 SW 36TH ST  
City-State-Zip: MIRAMAR FL 33027

Title            DV  
Name            OROPEZA, BEATRIZ H  
Address        16745 SW 36TH ST  
City-State-Zip: MIRAMAR FL 33027

*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:** JOSE M GOMEZ

**PRESIDENT**

**02/01/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date