

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000084275

**Entity Name:** MILENA SPASOJEVIC, PA**Current Principal Place of Business:**253 NE 2ND ST  
APT 222  
MIAMI, FL 33132**Current Mailing Address:**253 NE 2ND ST  
APT 222  
MIAMI, FL 33132 US**FEI Number:** 46-3912983**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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	DIRECTOR
Name	SPASOJEVIC, MILENA
Address	550 BILTMORE WAY PH 2 A-B
City-State-Zip:	CORAL GABLES FL 33134

Title	PRESIDENT
Name	SPASOJEVIC, MILENA
Address	550 BILTMORE WAY PH 2 A-B
City-State-Zip:	CORAL GABLES FL 33134

Title	TREASURER
Name	SPASOJEVIC, MILENA
Address	550 BILTMORE WAY PH 2 A-B
City-State-Zip:	CORAL GABLES FL 33134

Title	SECRETARY
Name	SPASOJEVIC, MILENA
Address	550 BILTMORE WAY PH 2 A-B
City-State-Zip:	CORAL GABLES FL 33134

Title	CFO
Name	SPASOJEVIC, MILENA
Address	550 BILTMORE WAY PH 2 A-B
City-State-Zip:	CORAL GABLES FL 33134

*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:** SPASOJEVIC, MILENA

PRESIDENT

04/02/2019

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