## 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000036828

Entity Name: ESELLE SWIM, INC.

**Current Principal Place of Business:** 

6099 STIRLING ROAD DAVIE, FL 33314

## **Current Mailing Address:**

P.O. BOX 370189 MIAMI, FL 33137 US

FEI Number: 46-5620963 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

COLLINS, SIMONE A 6099 STIRLING ROAD SUITE 105 DAVIE, FL 33314 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: SIMONE COLLINS 02/05/2018

Electronic Signature of Registered Agent Date

## Officer/Director Detail:

Title PRESIDENT Title VP

 Name
 COLLINS, SIMONE A
 Name
 HARVEY, LAURA

 Address
 P.O. BOX 370189
 Address
 P.O. BOX 370189

 City-State-Zip:
 MIAMI FL 33137
 City-State-Zip: MIAMI FL 33137

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.

FILED Feb 05, 2018

**Secretary of State** 

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