

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000040414

**Entity Name:** FORNARIS DESIGN INC.

**Current Principal Place of Business:**

10513 AKERS DR N  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

10513 AKERS DR N  
JACKSONVILLE, FL 32225 US

**FEI Number:** 47-3238519

**Certificate of Status Desired:** No

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

FORNARI, CARLOS A  
10513 AKERS DR N  
JACKSONVILLE, FL 32225 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 V  
Name FORNARI, JUAN CRUZ  
Address 265 FORT MILTON DR  
City-State-Zip: JACKSONVILLE FL 32220

Title P  
Name FORNARI, CARLOS  
Address 10513 AKERS DR N  
City-State-Zip: JACKSONVILLE FL 32225

Title SECRETARY  
Name LEON ROA, JENNIFER  
Address 265 FORT MILTON DR  
City-State-Zip: JACKSONVILLE FL 32220

Title TREASURER  
Name FORNARI, PABLO FACUNDO  
Address 10513 AKERS DR N  
City-State-Zip: JACKSONVILLE FL 32225

Title ASST. TREASURER  
Name FORNARI, JONAH AUGUSTINE  
Address 10513 AKERS DR N  
City-State-Zip: JACKSONVILLE FL 32225

*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:** CARLOS FORNARI

**PRESIDENT**

**03/07/2022**

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

\_\_\_\_\_  
Date