

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000081837

**Entity Name:** 5A MANAGEMENT CORP

**Current Principal Place of Business:**

10250 NW 46 STR.  
SUNRISE, FL 33351

**Current Mailing Address:**

10250 NW 46 STR.  
SUNRISE, FL 33351 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

HASSON, TODD J  
10250 NW 46 STR.  
SUNRISE, FL 33351 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            T  
Name            HASSON, TODD J  
Address        10250 NW 46 STR.  
City-State-Zip:    SUNRISE FL 33351

Title            P  
Name            HASSON, LAURA P  
Address        10250 NW 46 STR.  
City-State-Zip:    SUNRISE FL 33351

*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:** TODD HASSON

**TREASURER**

**04/03/2017**

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

\_\_\_\_\_  
Date