

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000083219

**FILED**  
**Mar 24, 2017**  
**Secretary of State**  
**CC8151194632**

**Entity Name:** GINGER MOSCA'S ACCOUNTING SOLUTIONS INC.

**Current Principal Place of Business:**

5001 SW 152ND AVE  
MIRAMAR  
33027, FL 33027

**Current Mailing Address:**

5001 SW 152ND AVE  
MIRAMAR  
33027, FL 33027 US

**FEI Number:** 81-4270172

**Certificate of Status Desired:** No

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

MOSCA, VIRGINIA C  
5001 SW 152ND AVE  
MIRAMAR, FL 33027 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	PVTS	Title	D
Name	MOSCA, VIRGINIA	Name	MOSCA, VIRGINIA
Address	5001 SW 152ND AVE	Address	5001 SW 152ND AVE
City-State-Zip:	MIRAMAR FL 33027	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:** VIRGINIA MOSCA

**PRESIDENT**

**03/24/2017**

Electronic Signature of Signing Officer/Director Detail

Date