#### 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. S MGR

SIGNATURE: ALEJANDRA AZOCAR MAR	RIA

Electronic Signature of Signing Officer/Director Detail

# **Current Principal Place of Business:**

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

5925 TOSCANA PL APT 301 MARGATE, FL 33063

# **Current Mailing Address:**

DOCUMENT# P17000022378

5925 TOSCANA PL **APT 301** MARGATE, FL 33063 US

### FEI Number: 82-0826832

### Name and Address of Current Registered Agent:

ALEJANDRA AZOCAR, MARIA 5925 TOSCANA PL APT 301 MARGATE, FL 33063 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

### **Officer/Director Detail :**

Title	MGR	Title	MGR
Name	ALEJANDRA AZOCAR, MARIA	Name	MORALES, PEDRO
Address	5925 TOSCANA PL APT 301	Address	5925 TOSCANA PL APT 301
City-State-Zip:	MARGATE FL 33063	City-State-Zip:	MARGATE FL 33063

# Certificate of Status Desired: No

03/05/2020 Date

Date

### FILED Mar 05, 2020 Secretary of State 2757612911CC