

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000040598

**Entity Name:** GARCES GROUP, INC.

**Current Principal Place of Business:**

908 S. LAKESHORE BLVD  
LAKE WALES, FL 33853

**Current Mailing Address:**

908 S. LAKESHORE BLVD  
LAKE WALES, FL 33853 US

**FEI Number: 82-1418723**

**Certificate of Status Desired: No**

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

GARCES, ANTHONY  
908 S. LAKESHORE BLVD  
LAKE WALES, FL 33853 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           | P                      | Title           | VICE PRESIDENT        |
| Name            | GARCES, ANTHONY        | Name            | GARCES, MARIA         |
| Address         | 908 S. LAKESHORE BLVD. | Address         | 908 S. LAKESHORE BLVD |
| City-State-Zip: | LAKE WALES FL 33858    | City-State-Zip: | LAKE WALES FL 33853   |

*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: ANTHONYGARCES**

**MANAGER**

**04/28/2022**

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

\_\_\_\_\_  
Date