

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000064360

**Entity Name:** ECOBLOOMING, INC.

**Current Principal Place of Business:**

501 SOUTH BLAIRSTONE ROAD  
1602  
TALLAHASSEE, FL 32301

**FILED**  
**May 01, 2019**  
**Secretary of State**  
**0610060161CC**

**Current Mailing Address:**

2100 SANS SOUCI BLVD  
201  
NORTH MIAMI, FL 33181 US

**FEI Number: 82-2607297**

**Certificate of Status Desired: No**

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

INTRAPRENEUR MANAGEMENT GROUP, INC.  
2100 SANS SOUCI BLVD  
201  
NORTH MIAMI, FL 33181 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  
Name SOLIS, OMAR H  
Address 501 SOUTH BLAIRSTONE ROAD,  
SUITE #1602  
City-State-Zip: TALLAHASSEE FL 32301

Title VP  
Name MOLFINO, ANTONELLA G  
Address PO BOX 151084  
City-State-Zip: CAPE CORAL FL 33915

*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: ANTONELLA MOLFINO**

**VICE PRESIDENT**

**05/01/2019**

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

\_\_\_\_\_  
Date