

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000066642

Entity Name: GONSAR CORP**Current Principal Place of Business:**201 ALHAMBRA CIR., STE. 501
CORAL GABLES, FL 33134**Current Mailing Address:**201 ALHAMBRA CIR., STE. 501
CORAL GABLES, FL 33134 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BARED, PABLO R
201 ALHAMBRA CIR., STE. 501
CORAL GABLES, FL 33134 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	PTD
Name	GONZALEZ, JOAQUIN
Address	201 ALHAMBRA CIR., STE. 501
City-State-Zip:	CORAL GABLES FL 33134

Title	SD
Name	SARMIENTO, DIEGO
Address	201 ALHAMBRA CIR., STE. 501
City-State-Zip:	CORAL GABLES FL 33134

Title	AS
Name	BARED, JULIETA
Address	201 ALHAMBRA CIR., STE. 501
City-State-Zip:	CORAL GABLES FL 33134

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: GONZALEZ , JOAQUIN

D

02/04/2021

Electronic Signature of Signing Officer/Director Detail_____
Date