

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000019226

Entity Name: FLORIDA CITY NURSERY INC

Current Principal Place of Business:

569 SW 3RD ST
FLORIDA CITY, FL 33034

Current Mailing Address:

569 SW 3RD ST
FLORIDA CITY, FL 33034

FEI Number: 86-2389847

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TELLES, ROCELIA
569 SW 3RD ST
FLORIDA CITY, FL 33034 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 PD
Name TELLES, ROCELIA
Address 569 SW 3RD ST
City-State-Zip: FLORIDA CITY FL 33034

Title STD
Name NUNO, DANIEL
Address 569 SW 3RD ST
City-State-Zip: FLORIDA CITY FL 33034

Title VPD
Name SANDOVAL, JUAN
Address 3370 NE 14 DRIVE APT 102
City-State-Zip: HOMESTEAD FL 33033

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: TELLES , ROCELIA

PD

03/09/2024

Electronic Signature of Signing Officer/Director Detail

Date