

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000078954

**FILED**  
**Apr 05, 2021**  
**Secretary of State**  
**4742470811CC**

**Entity Name:** 9404 CORPORATION

**Current Principal Place of Business:**

9404 NW 49 PLACE  
SUNRISE, FL 33351

**Current Mailing Address:**

9404 NW 49 PLACE  
SUNRISE, FL 33351 US

**FEI Number:** 65-0464717

**Certificate of Status Desired:** No

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

SCHIFF, JAMES ESQ.  
9130 S. DADELAND BLVD #2000  
MIAMI, FL 33156 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 D  
Name SCHWADRON, EVAN  
Address 9404 NW 49 PLACE  
City-State-Zip: SUNRISE FL

Title PD  
Name SCHWADRON, DAVID  
Address 9404 NW 49 PLACE  
City-State-Zip: SUNRISE FL 33351

Title D  
Name LAUREN, LAURIE  
Address 9404 NW 49TH PLACE  
City-State-Zip: SUNRISE FL

Title DS  
Name SCHREIBER, HELAINE  
Address 9404 NW 49TH PLACE  
City-State-Zip: SUNRISE FL 33351

*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:** DAVID SCHWADRON

**PRESIDENT**

**04/05/2021**

Electronic Signature of Signing Officer/Director Detail

Date