## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000028541

Entity Name: TRANSPLANTS, INC.

**Current Principal Place of Business:** 

5034 N. NEBRASKA AVE TAMPA, FL 33603

**Current Mailing Address:** 

5034 N. NEBRASKA AVE TAMPA, FL 33603

FEI Number: 65-0739648 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARRERA, LAJUANDA 5034 N. NEBRASKA AVE TAMPA, FL 33603 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: LAJUANDA BARRERA 03/09/2016

Electronic Signature of Registered Agent

Date

FILED Mar 09, 2016

**Secretary of State** 

CC6813006305

Officer/Director Detail:

Title OFFICER Title OWNER

NameFRIEDLY, JO FNameBARRERA, LAJUANDAAddress5034 N. NEBRASKA AVEAddress5034 N. NEBRASKA AVE

City-State-Zip: TAMPA FL 33603 City-State-Zip: TAMPA FL 33603

Title OTHER

Name BARRERA, JULIO

Address 5034 N. NEBRASKA AVE

City-State-Zip: TAMPA FL 33603

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: LAJUANDA BARRERA

Electronic Signature of Signing Officer/Director Detail

**OWNER** 

03/09/2016

Date