# 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000054661

Entity Name: 657-685 WASHINGTON AVE., PROPERTY, INC.

# **Current Principal Place of Business:**

12 N.E. 3RD STREET MIAMI, FL 33132

# **Current Mailing Address:**

12 N.E. 3RD STREET MIAMI, FL 33132 US

# FEI Number: 65-0762782

## Name and Address of Current Registered Agent:

SOSTCHIN, BURL 12 N.E. 3RD STREET MIAMI, FL 33132 US CC4295591828

Certificate of Status Desired: No

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

# **Officer/Director Detail :**

| Title           | DP                  | Title           | D                  |
|-----------------|---------------------|-----------------|--------------------|
| Name            | SOSTCHIN, BURL      | Name            | VIVES, GRACE       |
| Address         | 12 N.E. 3RD STREET  | Address         | 12 N.E. 3RD STREET |
| City-State-Zip: | MIAMI FL 33132      | City-State-Zip: | MIAMI FL 33132     |
| Title           | DVST                | Title           | D                  |
| Name            | SOSTCHIN, HENRIETTA | Name            | SOSTCHIN, DANA     |
| Address         | 12 N.E. 3RD STREET  | Address         | 12 N.E. 3RD STREET |
| City-State-Zip: | MIAMI FL 33132      | City-State-Zip: | MIAMI FL 33132     |
| Title           | D                   |                 |                    |
| Name            | PERCAL, IDA         |                 |                    |
| Address         | 12 N.E. 3RD STREET  |                 |                    |
| City-State-Zip: | MIAMI FL 33132      |                 |                    |

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: BURL SOSTCHIN

PRESIDENT

04/18/2013

Date

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Apr 18, 2013 Secretary of State CC4295591828