	y of State 9298963
Current Principal Place of Business:	0200000
5001 S HIGHWAY 17-92	
CASSELBERRY, FL 32707	
Current Mailing Address	
Current Mailing Address:	
4623 STILWELL DR	
ORLANDO, FL 32812-7555 US	
FEI Number: 46-3581581 Certificate of Status De	sired: No
Name and Address of Current Registered Agent:	
CORIS, OMAR 4623 STILWELL DR	
ORLANDO, FL 32812-7555 US	
ORLANDO, FL 32812-7555 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 F	Florida.
	Florida. 03/26/2018
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of F	
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of F SIGNATURE: OMAR CORIS	03/26/2018
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of F SIGNATURE: OMAR CORIS Electronic Signature of Registered Agent	03/26/2018
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of F SIGNATURE: OMAR CORIS Electronic Signature of Registered Agent Officer/Director Detail :	03/26/2018
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of P SIGNATURE: OMAR CORIS Electronic Signature of Registered Agent Officer/Director Detail : Title D Title D	03/26/2018
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of P SIGNATURE: OMAR CORIS Electronic Signature of Registered Agent Officer/Director Detail : Title D Name CORIS, OMAR Name CRUZ, JANNETTE	03/26/2018
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of P SIGNATURE: OMAR CORIS Electronic Signature of Registered Agent Officer/Director Detail : Title D Name CORIS, OMAR Name CRUZ, JANNETTE Address 4623 STILWELL DR Address 4623 STILWELL DR City-State-Zip: ORLANDO FL 32812-7555 City-State-Zip: ORLANDO FL 32812-7555	03/26/2018
The above name entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of P SIGNATURE: Officer/Director Detail: Title D Title D Name CORIS, OMAR Name CRUZ, JANNETTE Address 4623 STILWELL DR Address 4623 STILWELL DR City-State-Zip: ORLANDO FL 32812-7555 City-State-Zip: ORLANDO FL 32812-7555	03/26/2018
The above name entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of P SIGNATURE: OMAR CORIS Electronic Signature of Registered Agent Title D Name CORIS, OMAR Name CRUZ, JANNETTE Address 4623 STILWELL DR Address 4623 STILWELL DR City-State-Zip ORLANDO FL 32812-7555 City-State-Zip ORLANDO FL 32812-7555 Title D D Name COTTO, ARTURO D	03/26/2018
The above name units submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of P SIGNATURE: Colspan="2">OMAR CORIS Intervolve colspan="2">Intervolve colspan="2">Intervolve colspan="2">Intervolve colspan="2">Intervolve colspan="2" Title D Name CORIS, OMAR Name CRLANDO FL 32812-7555 City-State-Zip ORLANDO FL 32812-7555 Cotto, ARTURO Address 4623 STILWELL DR Cotto, ARTURO D Name COTTO, ARTURO Address 4623 STILWELL DR Cotto, ARTURO Address Cotto, ARTURO Address Address Address Address Address Address Address Address	03/26/2018
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2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1300008239

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: OMAR CORIS

PRESIDENT

03/26/2018

FILED Mar 26, 2018

Electronic Signature of Signing Officer/Director Detail