

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000007390

**Entity Name:** MAIKOL MONSALVE PARATHLETICA, CORP.

**Current Principal Place of Business:**

9741 FONTAINEBLEAU BLVD. APT 106  
MIAMI, FL 33172

**Current Mailing Address:**

9741 FONTAINEBLEAU BLVD. APT 106  
MIAMI, FL 33172 US

**FEI Number: 83-1134110**

**Certificate of Status Desired: No**

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

MONSALVE, MAIKOL L  
9741 FONTAINEBLEAU BLVD. APT 106  
MIAMI, FL 33172 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 P/D  
Name MONSALVE, MAIKOL L  
Address 9741 FONTAINEBLEAU BLVD. APT 106  
City-State-Zip: MIAMI FL 33172

Title V/D  
Name VAL, CECILIA N  
Address 9741 FONTAINEBLEAU BLVD. APT 106  
City-State-Zip: MIAMI FL 33172

Title S/D  
Name LACAU, RICARDO  
Address 9741 FONTAINEBLEAU BLVD. APT 106  
City-State-Zip: MIAMI FL 33172

*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: MAIKOL MONSALVE**

**P/D**

**05/13/2019**

Electronic Signature of Signing Officer/Director Detail

Date