

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 158513

**Entity Name:** CHECKER CAB OPERATORS, INC.

**Current Principal Place of Business:**

3111 NW 27TH AVENUE  
MIAMI, FL 33142

**Current Mailing Address:**

3111 NW 27TH AVE.  
MIAMI, FL 33242 US

**FEI Number: 65-0186398**

**Certificate of Status Desired: Yes**

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

HERNANDEZ, GILBERTO  
3111 NW 27 AVE  
MIAMI, FL 33142 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 PD  
Name RIOS, ROBERT  
Address 3111 NW 27TH AVENUE  
City-State-Zip: MIAMI FL 33142

Title V  
Name MEDINA, VICENTE  
Address 3111 NW 27TH AVENUE  
City-State-Zip: MIAMI FL 33142

Title S  
Name HERNANDEZ, GILBERTO  
Address 3111 NW 27TH AVENUE  
City-State-Zip: MIAMI FL 33142

Title DEACON  
Name HERNANDEZ, FRANK  
Address 3111 NW 27TH AVENUE  
City-State-Zip: MIAMI FL 33142

*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: GILBERTO HERNANDEZ**

**S**

**04/07/2021**

Electronic Signature of Signing Officer/Director Detail

Date