#### 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: ANGELINA GONZALEZ

Electronic Signature of Signing Officer/Director Detail

## 1821 SV MIAMI, F

The abov of Florida.

#### SIGNA

Electronic Signature of Registered Agent

#### **Officer/Director Detail :**

Title	PD	Title	VTSD
Name	GONZALEZ, ANGELINA	Name	GONZALEZ, MERCEDES
Address	1821 SW 8TH STREET	Address	2450 SW 15 STREET
City-State-Zip:	MIAMI FL 33135	City-State-Zip:	MIAMI FL 33145

GONZALEZ, ANGELINA 1821 SW 8TH STREET MIAMI, FL 33135 US
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State
SIGNATURE:

## DOCUMENT# 674187

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: FRITERIAS CORPORATION

#### **Current Principal Place of Business:**

1821 SW 8TH ST. MIAMI, FL 33135

#### **Current Mailing Address:**

1821 SW 8TH STREET MIAMI, FL 33135 US

#### FEI Number: 59-2100304

# Name and Address of Current Registered Agent:

Certificate of Status Desired: No

Date

PRESIDENT

04/04/2020

### FILED Apr 04, 2020 Secretary of State 9651611008CC