

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G64753

Entity Name: TOMACO NURSERY, INC.

Current Principal Place of Business:

901 PONCE DE LEON BLVD.
SUITE 402
CORAL GABLES, FL 33134

Current Mailing Address:

901 PONCE DE LEON BLVD.
SUITE 402
CORAL GABLES, FL 33134 US

FEI Number: 59-2343335

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TORRES, JOSE M
901 PONCE DE LEON BLVD.
SUITE 402
CORAL GABLES, FL 33134 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: JOSE M TORRES

02/07/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D, VP, T
Name COSTA, MARIA E.
Address 901 PONCE DE LEON BLVD.
SUITE 402
City-State-Zip: CORAL GABLES FL 33134

Title D, P, S
Name SMITH, MARIA COSTA
Address 901 PONCE DE LEON BLVD.
SUITE 402
City-State-Zip: CORAL GABLES FL 33134

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: MARIA COSTA SMITH

P

02/07/2018

Electronic Signature of Signing Officer/Director Detail

Date