

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H70321

**FILED**  
**Feb 28, 2024**  
**Secretary of State**  
**5969520353CC**

**Entity Name:** HARONITIS & ASSOCIATES, INC.

**Current Principal Place of Business:**

C/O DEPT. OF FINANCE AND CORP. ADMIN.  
163 IDEMA ROAD  
MARKHAM, ONTARIO L3R-1A9

**Current Mailing Address:**

C/O DEPT. OF FINANCE AND CORP. ADMIN.  
163 IDEMA ROAD  
MARKHAM, ONTARIO L3R-1A9 CA

**FEI Number:** 59-2566053

**Certificate of Status Desired:** Yes

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

COLON, EDUARDO N.  
10031 PINES BLVD.  
SUITE 238  
PEMBROKE PINES, FL 33024 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:** EDUARDO COLON

02/28/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name HARONITIS, NIKOS S.  
Address C/O DEPT. OF FINANCE AND CORP.  
ADMIN.  
163 IDEMA ROAD  
City-State-Zip: MARKHAM L3R-1A9

Title ST  
Name HARONITIS, NIKOS S  
Address 521 RUNNYMEDE ROAD  
City-State-Zip: TORONTO ONTARIO M6S-2Z8

Title D  
Name HARONITIS, EMMANUEL  
Address 179 BINGHAM AVE  
City-State-Zip: TORONTO ONTARIO M4E-3R2

Title D  
Name MAGNUSON, HENRY A  
Address 6329 SEA HAVEN DRIVE  
City-State-Zip: HIXSON, TN 37343

*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:** EMMANUEL HARONITIS

**PRESIDENT**

02/28/2024

Electronic Signature of Signing Officer/Director Detail

Date