

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J81849

**FILED**  
**May 12, 2020**  
**Secretary of State**  
**1071237509CC**

**Entity Name:** AMISTAD GAME FARM AND KENNELS CO.

**Current Principal Place of Business:**

ONE NORTH CLEMATIS STREET  
SUITE 200  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

ONE NORTH CLEMATIS STREET  
SUITE 200  
WEST PALM BEACH, FL 33401

**FEI Number:** 65-0038052

**Certificate of Status Desired:** No

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

SADLER, BENJAMIN  
ONE NORTH CLEMATIS STREET  
SUITE 200  
WEST PALM BEACH, FL 33401 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:** BENJAMIN SADLER

05/12/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP  
Name FANJUL, JOSE F.  
Address ONE NORTH CLEMATIS ST STE 200  
City-State-Zip: WEST PALM BEACH FL 33401

Title DV  
Name FANJUL, EMILIA M.  
Address ONE NORTH CLEMATIS ST STE 200  
City-State-Zip: WEST PALM BEACH FL 33401

Title S  
Name TABERNILLA, ARMANDO A.  
Address ONE NORTH CLEMATIS ST STE 200  
City-State-Zip: WEST PALM BEACH FL 33401

Title V  
Name FANJUL, JR., JOSE F.  
Address ONE NORTH CLEMATIS ST STE 200  
City-State-Zip: WEST PALM BEACH FL 33401

Title TREASURER  
Name BLOMQUIST, ERIK J.  
Address ONE NORTH CLEMATIS STREET  
SUITE 200  
City-State-Zip: WEST PALM BEACH FL 33401

*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:** ERIK BLOMQUIST

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05/12/2020

Electronic Signature of Signing Officer/Director Detail

Date