

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M21214

**Entity Name:** HECTOR & HECTOR INC.

**Current Principal Place of Business:**

6790 NW 84TH AVENUE  
MIAMI, FL 33166

**Current Mailing Address:**

6790 NW 84TH AVENUE  
MIAMI, FL 33166

**FEI Number:** 59-2582588

**Certificate of Status Desired:** No

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

MANASTER, JOSHUA D  
4770 BISCAYNE BOULEVARD  
SUITE 1400  
MIAMI, FL 33137 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	PSTD	Title	VD
Name	SARDINAS, HECTOR J	Name	SARDINAS, HECTOR
Address	6790 NW 84TH AVENUE	Address	6790 NW 84 AVENUE
City-State-Zip:	MIAMI FL 33166	City-State-Zip:	MIAMI FL 33166

*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:** HECTOR J SARDINAS

**PRESIDENT**

**02/21/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date