

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M27946

Entity Name: SUCOBBCO, INC.**Current Principal Place of Business:**4000 PONCE DE LEON BLVD
STE 470
CORAL GABLES, FL 33146**Current Mailing Address:**PO BOX 14-4200
CORAL GABLES, FL 33114-4200**FEI Number:** 59-2663450**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PERDOMO, MERCEDES
4000 PONCE DE LEON BLVD
STE 470
CORAL GABLES, FL 33146 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	D
Name	COBB, SUE M.
Address	PO BOX 14-4200
City-State-Zip:	CORAL GABLES FL 33114-4200

Title	D P T
Name	COBB, TOBIN T
Address	PO BOX 14-4200
City-State-Zip:	CORAL GABLES FL 33114-4200

Title	D
Name	COBB, CHARLES E JR.
Address	PO BOX 14-4200
City-State-Zip:	CORAL GABLES FL 33114-4200

Title	VP S
Name	COBB, CHRISTIAN M
Address	PO BOX 14-4200
City-State-Zip:	CORAL GABLES FL 33114-4200

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: MERCEDES PERDOMO

RA

03/28/2018

Electronic Signature of Signing Officer/Director Detail

Date