

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000098985

**Entity Name:** ALEXANDER M. ALTIER, INC.

**Current Principal Place of Business:**

4615 N.UNIVERSITY DR.  
CORAL SPRING, FL 33067

**Current Mailing Address:**

4615 N.UNIVERSITY DR.  
CORAL SPRING, FL 33067

**FEI Number:** 65-1050057

**Certificate of Status Desired:** No

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

ALTIER, DEBRA  
4615 N.UNIVERSITY DR. .  
CORAL SPRINGS, FL 33067 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	P	Title	VP
Name	ALTIER, ALEXANDER M	Name	ALTIER, DEBRA G
Address	5068 NW 98TH LN.	Address	5068 NW 98TH LN.
City-State-Zip:	CORAL SPRINGS FL 33076	City-State-Zip:	CORAL SPRINGS FL 33076

*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:** DEBRA ALTIER

VP

04/11/2018

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

\_\_\_\_\_  
Date