

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000031225

**Entity Name:** CENTER FOR PROFESSIONAL TRAINING AND DEVELOPMENT, INC.

**Current Principal Place of Business:**

12995 NE 7TH AVENUE  
NORTH MIAMI, FL 33161

**Current Mailing Address:**

12995 NE 7TH AVENUE  
NORTH MIAMI, FL 33161 US

**FEI Number: 65-0443331**

**Certificate of Status Desired:** No

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

FRANCOIS, ANTHONY  
12601 NORTH EAST 7TH AVE  
NORTH MIAMI, FL 33161 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           | VICE PRES            |
| Name            | FRANCOIS, ANTHONY        | Name            | FRANCOIS, JUDITH     |
| Address         | 12995 NORTH EAST 7TH AVE | Address         | 12995 NE 7TH AVE     |
| City-State-Zip: | NORTH MIAMI FL 33161     | City-State-Zip: | NORTH MIAMI FL 33161 |

*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: ANTHONY FRANCOIS**

**PRESIDENT**

**03/20/2020**

Electronic Signature of Signing Officer/Director Detail

Date