

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000110426

**Entity Name:** MARIO PARADA PRESSURE CLEANING SERVICE, INC.

**FILED**  
**Sep 26, 2019**  
**Secretary of State**  
**7072365632CC**

**Current Principal Place of Business:**

19150 SW 16TH STREET  
PEMBROKE PINES, FL 33029

**Current Mailing Address:**

19150 SW 16TH STREET  
PEMBROKE PINES, FL 33029 US

**FEI Number: 13-4216916**

**Certificate of Status Desired: Yes**

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

PARADA, MARIO  
202 S.W. 54 AVENUE  
PLANTATION, FL 33317 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 OD  
Name PARADA, MARIO  
Address 202 S.W. 54 AVENUE  
City-State-Zip: PLANTATION FL 33317

Title OD  
Name PARADA, ADRIANA P  
Address 202 S.W. 54 AVENUE  
City-State-Zip: PLANTATION FL 33317

Title OD  
Name MOHAMMED, NAZEERA  
Address 202 S.W. 54 AVENUE  
City-State-Zip: PLANTATION FL 33317

Title OD  
Name PARADA, REBECCA M  
Address 202 SW 54TH AVE  
City-State-Zip: PLANTATION FL 33317

*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: ADRIANA P PARADA**

**VICE PRESIDENT**

**09/26/2019**

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

\_\_\_\_\_  
Date