

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000050012

**Entity Name:** ILOCANDIA, INC.

**Current Principal Place of Business:**

9526 ARGYLE FOREST BLVD  
STE B2  
JACKSONVILLE, FL 32222

**Current Mailing Address:**

9526 ARGYLE FOREST BLVD  
STE B2  
JACKSONVILLE, FL 32222

**FEI Number:** 06-1697405

**Certificate of Status Desired:** No

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

LELINA, BENJAMIN  
9526 ARGYLE FOREST BLVD  
STE B2  
JACKSONVILLE, FL 32222 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            LELINA, BENJAMIN  
Address        2693 COUNTRY CLUB BLVD  
City-State-Zip: ORANGE PARK FL 32073

Title            D  
Name            LELINA, TERESITA  
Address        2693 COUNTRY CLUB BLVD  
City-State-Zip: ORANGE PARK FL 32073

*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:** BENJAMIN LELINA

**PRESIDENT**

**04/02/2019**

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

\_\_\_\_\_  
Date