

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000016657

**Entity Name:** CORREDOR & HUSSEINI, P.A.

**Current Principal Place of Business:**

3905 NW 107 AVE. SUITE 502  
DORAL, FL 33178

**Current Mailing Address:**

3905 NW 107 AVE. SUITE 502  
DORAL, FL 33178 US

**FEI Number:** 75-3144838

**Certificate of Status Desired:** Yes

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

CORREDOR, MARIA E  
3905 NW 107 AVE.  
SUITE 502  
DORAL, FL 33178 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 PD  
Name CORREDOR, MARIA E  
Address 3905 NW 107TH AVE  
SUITE 502  
City-State-Zip: DORAL FL 33178

Title V  
Name HUSSEINI, LINA  
Address 17396 SW 48TH ST.  
City-State-Zip: MIRAMAR FL 33029

*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:** MARIA CORREDOR

**PRESIDENT**

**01/31/2020**

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

\_\_\_\_\_  
Date