#### 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: JOSE L CORREAL

Electronic Signature of Signing Officer/Director Detail

Ρ

# DOCUMENT# P04000040578

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: JOSE L. CORREAL, P.A.

#### **Current Principal Place of Business:**

820 NE 70 ST MIAMI, FL 33138

#### **Current Mailing Address:**

820 NE 70 ST MIAMI, FL 33138 US

# **FEI Number: NOT APPLICABLE**

# Name and Address of Current Registered Agent:

CORREAL, JOSE L 820 NE 70 ST MIAMI, FL 33138 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

### **Officer/Director Detail :**

Title	Ρ	Title	S
Name	CORREAL, JOSE L	Name	CORREAL, JOSE L
Address	820 NE 70 ST	Address	820 NE 70 ST
City-State-Zip:	MIAMI FL 33138	City-State-Zip:	MIAMI FL 33138

FILED		
Apr 24, 2017		
Secretary of State		
CC6004971742		

Certificate of Status Desired: No

04/24/2017

Date