| FEI Number: 76-0757400 | | | Certificate of Status Desired: No | |
|--|--|-----------------|-----------------------------------|------------|
| Name and Address of Current Registered Agent: | | | | |
| VALDES, PABL 12484 NW SOU MEDLEY, FL 3 | JTH RIVER DR | | | |
| 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 | E: PABLO J VALDES | | | 02/11/2019 |
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | |
| Title | PRESIDENT, TREASURER, DIRECTOR | Title | VP | |
| Name | VALDES, PABLO J | Name | FONTE-ESQUIVEL, NIURKA V | P |
| Address | 12484 NW SOUTH RIVER DR | Address | 12484 NW SOUTH RIVER DR | |
| City-State-Zip: | MEDLEY FL 33178 | City-State-Zip: | MEDLEY FL 33178 | |
| Title | SECRETARY | | | |
| Name | SUERO, LUCILLA G SECRETARY | | | |
| Address | 12484 NW S RIVER DR | | | |

DOCUMENT# P04000041491

Entity Name: JANNETTE VILLAS AT DORAL, INC.

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

12484 NW SOUTH RIVER DR MEDLEY, FL 33178

Current Mailing Address:

12484 NW SOUTH RIVER DR **MEDLEY. FL 33178**

FEI Number: 76-0757400

Ν

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: PABLO J VALDES

City-State-Zip: MEDLEY FL 33178

PRESIDENT

02/11/2019 Date

Electronic Signature of Signing Officer/Director Detail

FILED Feb 11, 2019 **Secretary of State** 0852088787CC

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