

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000154015

Entity Name: M KATRINA MUSE PA

Current Principal Place of Business:

3149 N PONCE DE LEON BLVD
SUITE 4
SAINT AUGUSTINE, FL 32084

Current Mailing Address:

3149 N PONCE DE LEON BLVD
SUITE 4
SAINT AUGUSTINE, FL 32084 US

FEI Number: 20-1855815

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MUSE, M KATRINA
3149 N PONCE DE LEON BLVD
SUITE 4
SAINT AUGUSTINE, FL 32084 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 P
Name MUSE, M KATRINA
Address 3149 N PONCE DE LEON BLVD
SUITE 4
City-State-Zip: SAINT AUGUSTINE FL 32084

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: M KATRINA MUSE PA

OWNER

01/23/2017

Electronic Signature of Signing Officer/Director Detail

Date