

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000083971

Entity Name: LAZARO LEON, P.A.

Current Principal Place of Business:

16001 SW 95 AVE
MIAMI, FL 33157

Current Mailing Address:

P.O. BOX 4244
HIALEAH, FL 33014

FEI Number: 32-0152320

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEON, LAZARO
16001 SW 95 AVE
MIAMI, FL 33157 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 LEON, LAZARO
Address 5375 NW 159 ST #4244
City-State-Zip: HIALEAH FL 33014

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: LAZARO LEON

PRESIDENT

03/17/2016

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date