

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000019934

**Entity Name:** CLAUDIENNE R. HIBBERT, P.A.

**Current Principal Place of Business:**

17742 SW 23RD STREET  
MIRAMAR, FL 33029

**Current Mailing Address:**

18459 PINES BLVD  
#358  
PEMBROKE PINES, FL 33029 US

**FEI Number:** 42-1695047

**Certificate of Status Desired:** No

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

HIBBERT, CLAUDIENNE  
17742 SW 23RD STREET  
MIRAMAR, FL 33029 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 MS  
Name HIBBERT, CLAUDIENNE R  
Address 18459 PINES BLVD  
#358  
City-State-Zip: PEMBROKE PINES 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:** CLAUDIENNE HIBBERT

**PRESIDENT**

**02/13/2015**

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

\_\_\_\_\_ Date