## 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: ALICIA MARIE NORWOOD

Electronic Signature of Signing Officer/Director Detail

# 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000059014

### Entity Name: ALICIA NORWOOD & VICTORIA GONZALEZ, INC.

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

61 N.E. 14TH STREET HOMESTEAD, FL 33030

### **Current Mailing Address:**

61 N.E. 14TH STREET HOMESTEAD, FL 33030

## FEI Number: 83-0458621

## Name and Address of Current Registered Agent:

PIERCE, JR., JAMES R. CPA 44 N.E. 16TH STREET HOMESTEAD, FL 33030 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

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

Title	VD	Title	PSTD
Name	GONZALEZ, VICTORIA	Name	NORWOOD, ALICIA MARIE
Address	61 N.E. 14TH STREET	Address	61 N.E. 14TH STREET
City-State-Zip:	HOMESTEAD FL 33030	City-State-Zip:	HOMESTEAD FL 33030

Signature of Registered Agent				
:				
	Title	PSTD		
Z, VICTORIA	Name	NORWOOD, ALICIA MARIE		
	Adroop			

PRESIDENT

01/25/2019

# FILED Jan 25, 2019 Secretary of State 1147883672CC

Date

Certificate of Status Desired: No

Date