

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000017650

**Entity Name:** CARMEN MORRIS ACCOUNTING SERVICES, INC.

**Current Principal Place of Business:**

841 NW 47TH TERRACE  
MIAMI, FL 33127

**Current Mailing Address:**

841 NW 47TH TERRACE  
MIAMI, FL 33127 US

**FEI Number: 36-4599263**

**Certificate of Status Desired: No**

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

LEWIS, ANDRE  
831 NW 167TH TERRACE  
N. MIAMI, FL 33169 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 D  
Name COLEMAN, LIONITA  
Address 9239 SOUTHAMPTON PL  
City-State-Zip: BOCA RATON FL 33434

Title D  
Name KAHILL, CLARISSA  
Address 831 NW 167TH TERRACE  
City-State-Zip: N. MIAMI FL 33169

Title D  
Name KAHILL, SONYA  
Address 176 NE 82ND TERRACE  
A  
City-State-Zip: MIAMI FL 33138

Title P  
Name MORRIS, CARMEN  
Address 841 NW 47TH TERRACE  
City-State-Zip: MIAMI FL 33127

*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: CARMEN MORRIS**

**PRESIDENT**

**04/20/2016**

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

\_\_\_\_\_  
Date