

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000028254

**Entity Name:** JOSE N. SERVICE, CORP

**Current Principal Place of Business:**

4218 FERN STREET  
LAKE WORTH, FL 33461

**Current Mailing Address:**

489 SW PORT ST LUCIE BLVD  
PORT ST LUCIE, FL 34953

**FEI Number:** 20-8588926

**Certificate of Status Desired:** No

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

ESP TAX SERVICES, INC  
489 SW PORT ST LUCIE BLVD  
PORT ST LUCIE, FL 34953 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 BENCOSME COLLADO, JOSE N  
Address 4218 FERN STREET  
City-State-Zip: LAKE WORTH FL 33461

Title TREASURER  
Name BENCOSME GARCIA, JACOBO R  
Address 4218 FERN STREET  
City-State-Zip: LAKE WORTH FL 33461

Title AUTHORIZED REPRESENTATIVE  
Name BENCOSME GARCIA, JOSE G  
Address 4218 FERN STREET  
City-State-Zip: LAKE WORTH FL 33461

Title SECRETARY  
Name BENCOSME, GLORIA E  
Address 4218 FERN STREET  
City-State-Zip: LAKE WORTH FL 33461

*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:** BENCOSME COLLADO , JOSE N

**PRESIDENT**

**02/12/2020**

Electronic Signature of Signing Officer/Director Detail

Date