

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000045205

**Entity Name:** ALEGAROS SERVICES INC.

**Current Principal Place of Business:**

6693 COLLINS AVE.  
225  
MIAMI, FL 33141

**FILED**  
**Jan 19, 2017**  
**Secretary of State**  
**CC0850894123**

**Current Mailing Address:**

6693 COLLINS AVE.  
225  
MIAMI, FL 33141

**FEI Number:** 20-8832062

**Certificate of Status Desired:** No

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

GARCIA, ALEJANDRO  
6693 COLLINS AVE.  
225  
MIAMI, FL 33141 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 GARCIA, ALEJANDRO  
Address 6693 COLLINS AVE., SUITE 225  
City-State-Zip: MIAMI FL 33141

Title V  
Name DUQUE, MONICA  
Address 6693 COLLINS AVE., SUITE 225  
City-State-Zip: MIAMI FL 33141

*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:** ALEJANDRO GARCIA

**PRESIDENT**

**01/19/2017**

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

\_\_\_\_\_  
Date