

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000076907

Entity Name: CORINE'S 24/7 BAIL BONDS, INC.

Current Principal Place of Business:

1268 EDGEWOOD AVE
SUITE 2
JACKSONVILLE, FL 32208

Current Mailing Address:

14014 SUMMER BREEZE DR
JACKSONVILLE, FL 32218

FEI Number: 65-1311490

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOORE, CORINE
14014 SUMMER BREEZE DR
JACKSONVILLE, FL 32218 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 MOORE, CORINE
Address 14014 SUMMER BREEZE DR
City-State-Zip: JACKSONVILLE FL 32218

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: CORINE MOORE

D

04/29/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date