

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000047747

**Entity Name:** ICONO MANAGEMENT SERVICES, INC.

**Current Principal Place of Business:**

4320 SW 186 AVE  
MIRAMAR, FL 33029

**Current Mailing Address:**

4320 SW 186 AVE  
MIRAMAR, FL 33029

**FEI Number:** 45-2443263

**Certificate of Status Desired:** No

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

ROSALES, LUIS  
5931 NW 173 DR  
STE 9  
MIAMI, FL 33015 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 PS  
Name GONCALVES, ADRIANA  
Address 3240 SW 186 TER  
City-State-Zip: MIRAMAR FL 33029

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:** ADRIANA GONCALVES

**PRESIDENT**

**01/09/2017**

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

\_\_\_\_\_  
Date