

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000013635

Entity Name: VERA PLUS 4, INC**Current Principal Place of Business:**2333 BRICKELL AVE
APT 1516
MIAMI, FL 33129**Current Mailing Address:**2333 BRICKELL AVE
APT 1516
MIAMI, FL 33129 US**FEI Number:** 45-4487744**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ANGELA, VERA MRS
2333 BRICKELL AVE
APT 1516
MIAMI, FL 33129 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	PRES
Name	VERA, REINALDO MR
Address	2333 BRICKELL AVE APT 1516
City-State-Zip:	MIAMI FL 33129

Title	VP
Name	VERA, RAUL A
Address	2333 BRICKELL AVE APT 1516
City-State-Zip:	MIAMI FL 33129

Title	VP
Name	VERA, ALEXIS L
Address	2333 BRICKELL AVE APT 1516
City-State-Zip:	MIAMI FL 33129

Title	SEC
Name	VERA, EDUARDO M
Address	2333 BRICKELL AVE APT 1516
City-State-Zip:	MIAMI FL 33129

Title	TREA
Name	VERA, ANGELA
Address	2333 BRICKELL AVE APT 1516
City-State-Zip:	MIAMI FL 33129

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: REINALDO VERA**PRESIDENT****04/30/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date